PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUL 26 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # [redacted] P01000000886

1. Corporation Name

Hillsboro Group, Inc.

Principal Place of Business / Mailing Address

19501 NE 10th Avenue
#203
Miami, FL 33179

400039576404
07/27/04--01081--012 **750.00

400039576404
07/27/04--01081--011 **150.00

If above addresses are incorrect in any way, line through incorrect information and enter correct in below.

2. New Principal Office Address, If Applicable: 2436 N. Federal Highway
Suite, Apt. #, etc.:
City & State: Lighthouse Point, FL
Zip: 33064 Country: USA

3. New Mailing Office Address, If Applicable:
Suite, Apt. #, etc.:
City & State:
Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 1/03/01

5. FEI Number: 59-1019723 Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	Ed Houston	2436 N. Federal Highway	Lighthouse Point, FL 33064
P	J. Edward Houston		

REINSTATEMENT 03-04

8. Name and Address of Current Registered Agent

Eric P. Littman
7695 SW 104 Street
Suite 210
Miamia, FL 33156

9. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable):
Suite, Apt. #, Etc.:
City: State: FL Zip Code:

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: REGISTERED AGENT MUST SIGN Date: 7/21/04

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: J. Edward Houston 7/21/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Date: Daytime Phone #