

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 DEC -2 AM 8:01

DOCUMENT # **P010000023134**

1. Corporation Name

BLAIRMORE CORP.

2. Principal Office Address

3610 YACHT CLUB DRIVE

Suite, Apt. #, etc.

716

City & State

AVENTURA, FL

Zip

33180

Country

3. Mailing Office Address

3610 YACHT CLUB DRIVE

Suite, Apt. #, etc.

716

City & State

AVENTURA, FL

Zip

33180

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/06/2001

5. FEI Number

65-1101206

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$875 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

HEREDIA, HERNANDO

Street Address (P.O. Box Number is Not Acceptable)

3610 YACHT CLUB DRIVE

Suite, Apt. #, Etc.

716

City

AVENTURA

State

FL

Zip Code

33180

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	HEREDIA, HERNANDO	3610 YACHT CLUB DR. SUITE 716	AVENTURA, FL. 33180

10. 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:

H. Heredia

HERNANDO HEREDIA

11/19/2002

305-932-6402

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)

DO NOT DETACH/

2052

BLAIRMORE CORP.
3610 YACHT CLUB DRIVE
SUITE 716
AVENTURA, FL 33180

OCTOBER 19, 2002.

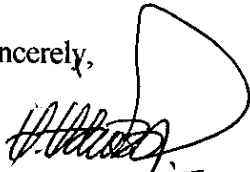
Secretary of State
Division of Corporation
409 E. Gaines Street
Tallahassee, Florida 32399

RE: P01000023134

Gentlemen:

By this means I would like to request the UNIFORM BUSINESS REPORT for the year 2002. Please advise that the original report was not received. We assumed that the reason relates to incorrect address shown in your records. We respectfully request you update your records with the address above mentioned.

Sincerely,



Hernando Heredia
President