

H05000214790

FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2005 SEP 8 PM 5:28

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONSSECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000035958

1. Corporation Name

NORA PAINTING & DECORATION, CORP.

2. Principal Office Address

11375 SW 44TH STREET

Suite, Apt. #, etc.

SUITE 2

City & State

MIAMI, FL

Zip

33165

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT
GR26081 (8/05)

02-05

4. Date Incorporated or Qualified
To Do Business in Florida

04-09-01

5. FEI Number

20-3428606

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name

YURI ASTORGA SR

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

11375 SW 44TH STREET

Suite, Apt. #, Etc.

SUITE 2

City

MIAMI

State
FL

Zip Code

33165

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

9/07/05

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
DP	YURI ASTORGA SR	11375 SW 44TH STREET	MIAMI, FL. 33165
DV	NORA ASTORGA	11375 SW 44TH STREET	MIAMI, FL. 33165
DS	YURI ASTORGA JR	11375 SW 44TH STREET	MIAMI, FL. 33165
DT	JAVIER ASTORGA	11375 SW 44TH STREET	MIAMI, FL. 33165

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/07/05 (786) 326 7850

Date

Daytime Phone #

H05000214790

9/12/00

2/2

Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850)205-0384

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305)266-4080
Fax Number : (305)221-2388

CORPORATION REINSTATEMENT

NORA PAINTING & DECORATION, CORP.

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$1,200.00

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