

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JAN -9 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000055832

1. Corporation Name

A TOUCH OF CLASS HOME INVESTMENTS, INC.

REINSTATEMENT

05-07

W06000052535

2. Principal Office Address

15476 NW 77 CT.

3. Mailing Office Address

15476 NW 77 CT.

Suite, Apt. #, etc.

233

Suite, Apt. #, etc.

233

City & State

MIAMI LAKES; FL.

City & State

MIAMI LAKES; FL.

Zip

33016

Country

U.S.A.

Zip

33016

Country

U.S.A.

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

65-1109529

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

SANTIAGO GONZALEZ

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

15476 NW 77 CT.

Suite, Apt. #, Etc.

233

City

MIAMI LAKES;

700082285237

12/05/06--01011--014 **300.00

700082285237

12/05/06--01011--015 **8.75

State

FL

Zip Code

33016

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 11.29.06

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	SANTIAGO GONZALEZ	15476 NW 77 CT. #233	MIAMI LAKES; FL. 33016

700082285237
01/25/07--01009--016 **150.00

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 contained in Chapter 119, 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

Date

11.29.06

Daytime Phone #

2 of 2
11.29.06.

TO WHOM IT MAY CONCERN: C/O MRS. E. PETERSON;
My NAME IS SANTIAGO GONZALEZ DIRECTOR/OWNER
FOR "A TOUCH OF CLASS HOME INVESTMENTS INC"; AS I SPOKE TO
YOU EARLIER IN REFERENCE TO REINSTATEMENT OF CORP.
AS I TRAVEL THROUGHOUT US. AND HAVE HAD A TURN-OVER
OF EMPLOYEES WITH THE COMPANY I NEVER RECEIVED
MY ²⁰⁰⁵ RENEWAL NOTIFICATION AND WAS NEVER AWARE
IT WAS EXPIRED UNTIL RECENTLY. AS PER YOUR INSTRUCTIONS
ENCLOSED IS A CHECK FOR \$300.00 CK. # 1668. AND A
MONEY ORDER FOR \$8.75 FOR CERTIFICATE OF STATUS.
THANK YOU FOR YOUR HELP AND ATTENTION ON THIS
MATTER. AND THANK YOU FOR WAIVER OF PENALTIES.

Sincerely;



Santiago Gonzalez

15476 NW 77 CT. #233

Miami LAKES; FL. 33016.

FEI #. 65-1109529

DOCUMENT #. P01000055832.

CELL #. 786-356-8300

OFF #. (954) 680-1223