

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUL 15 AM 11:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000070612

1. Corporation Name

POINT INVESTMENT CORPORATION

2. Principal Office Address

22433 BENIDORM DRIVE

Suite, Apt. #, etc.

City & State

BOCA RATON

Zip

33428

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

1

Zip

Country

2002-2003 UBR

3/19/02 90018 041 \$150.00

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

04-3589969

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

ALBA VIVIANA APONTE

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

22433 BENIDORM DRIVE

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33428

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

Alba Viviana Aponte

REGISTERED AGENT MUST SIGN

SIGNATURE

Date 6/26/03

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
PRESI- DENT	ALBA VIVIANA APONTE	22433 BENIDORM DR	BOCA RATON, FL 33428
VICE- PRESID.	NESTOR HERNAN FRANCO	22433 BENIDORM DR	BOCA RATON, FL 33428

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:

Alba Viviana Aponte

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (SIGNATURE)

6/26/03

Date

561-347-2494

Daytime Phone

CR2E081 (10/02)

2052

June 27, 2003

Florida Department of State
Division of Corporations
Attn. Ms. Eula Peterson
Tallahassee

REF: Your letter number 003A00023424

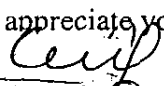
~~In responding to your letter above-mentioned, please find enclosed the following:~~

1. Copy of check # 157 for \$150, your office cashed it on March 21st, 2002. This check was attached with my 2002 UPR; as per your records this corporation was determinate INACTIVE few months later.
2. Check #357 for \$150 for my 2003 report.
3. Corporation reinstatement form filled out
4. Copy of your letter number 003A00023424

Since March 9th, 2003 we have been requesting that you reinstate My Corporation because we did not received your letter, dated March 21, 2002, which was sent to me to be signed.

We will expect your consideration in waiving the reinstatement fee.

We really appreciate your prompt attention in this matter.


Alba Viviana Aponte
Alba Viviana Aponte

POINT INVESTMENT CORPORATION
22433 Benidorm Drive
Boca Raton, FL 33428