

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 SEP 15 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000108248

1. Corporation Name
Jade 32C Corporation

2100 Ponce de Leon Blvd.
2100 Ponce de Leon Blvd.

2. Principal Office Address
2100 Ponce de Leon Blvd.

Suite, Apt. #, etc.
600

City & State
Coral Gables Florida

Zip Country
33134 U.S.A.

3. Mailing Office Address
2100 Ponce de Leon Blvd.

Suite, Apt. #, etc.
600

City & State
Coral Gables Florida

Zip Country
33134 U.S.A.

REINSTATEMENT 03-04

5/5/03 90247 048 150.00

**4. Date Incorporated or Qualified
To Do Business in Florida** 11/09/2001

5. FEI Number
20-1587060

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
Carlos J. Villaneva, Esq.

Street Address (P.O. Box Number is Not Acceptable)
2100 Ponce de Leon Blvd.

Suite, Apt. #, Etc.
600

City
Coral Gables

State Zip Code
FL 33134

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

Date

Sept 13, 2004

REGISTERED AGENT MUST SIGN

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	Pearson, Harry	2100 Ponce de Leon Blvd. #600	Coral Gables, Florida 33134
VP	Patino, Mauricio	2100 Ponce de Leon Blvd. #600	Coral Gables, Florida 33134
S	Carlos J. Villanueva	2100 Ponce de Leon Blvd. #600	Coral Gables, Florida 33134

600041323326
09/24/04--01055--012 **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 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:

CARLOS J. VILLANUEVA

SEC.

Sept. 13, 2004

305 377 0812

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (01/04)

ps 282

Law Offices of Carlos J. Villanueva, P.A.

Attorneys at Law
2100 Ponce De Leon Boulevard, Suite 600
Coral Gables, Florida 33134

Telephone: 305.377.0812
Facsimile: 305.377.8848

E-mail Address: cvillanueva@unaley.com
Website: www.unaley.com

Sept. 13, 2004

Dept. of State
Division of Corporations
Reinstatement Division
P.O. Box 6327
Tallahassee, Florida 32314

Re: Document No. P0100010848

Dear Sir/Madam:

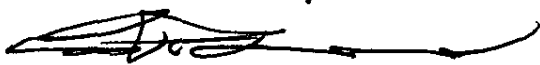
I enclose a check for \$150.00 for the 2004 renewal. Please note that you have already received and processed the 2003 renewal fee of \$150.00. The corporation does have it's federal identification number.

This office did not receive a letter from May of 2003. I also enclose the reinstatement form duly completed.

Please process this reinstatement as soon as you can.

Thank you for your courtesies.

Sincerely,



Carlos J. Villanueva