

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS

04 MAY 28 PM 3:20

REINSTATEMENT 02-04

DOCUMENT # P01000117585

1. Corporation Name

BAYSHORE VIEW INVESTMENTS, INC.

7510 BEACH VIEW DRIVE
7510 BEACH VIEW DRIVE

2. Principal Office Address

7510 BEACH VIEW DRIVE

Suite, Apt. #, etc.

City & State

NORTH BAY VILLAGE, FL

Zip

33141

Country

USA

3. Mailing Office Address

7510 BEACH VIEW DRIVE

Suite, Apt. #, etc.

City & State

NORTH BAY VILLAGE, FL

Zip

33141

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 12/12/01

5. FEI Number

60-0000058

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

YONGYUTH NETHONGKOME

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

1260 NE 97TH STREET

Suite, Apt. #, Etc.

City

MIAMI SHORES

State

FL

Zip Code

33138

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

S. Knattongcome

Date 5/13/04

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
D.	YONGYUTH NETHONGKOME	1260 NE 97TH STREET	MIAMI SHORES, FL 33138
D	SIRIPHAN KNATTONGCOME	1260 NE 97TH STREET	MIAMI SHORES, FL 33138

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:

S. Knattongcome

5/13/04

305-762-5947

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)

M. TACHIBANA, C.P.A., P.A.

MEMBER - AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS • FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

May 13, 2004

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

**RE: BAYSHORE VIEW INVESTMENTS, INC.
REINSTATEMENT**

Dear Sir/Madam

Enclosed, please find a check in the amount of \$ 450 as payment for the State of Florida Corporation Reinstatement.

My client, Bayshore View Investments, Inc., has not received the renewal notice since 2002 from the State. They are now submitting their Reinstatement and 2004 Annual Report filing upon our reminder to them.

We would greatly appreciate your kind understanding and cooperation in this matter.

Very Truly Yours,



M. Tachibana, C.P.A.

enc.