

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 JAN 27 PM 3:37

DOCUMENT # P02000008428

1. Corporation Name

JUAREZ-NUNES PROPERTIES INC.

**REINSTATEMENT** 03-04

2. Principal Office Address

2100 PONCE DE LEON BLVD.

Suite, Apt. #, etc.

600

City & State

CORAL GABLES, FLORIDA

Zip

33134

Country

DADE

3. Mailing Office Address

2100 PONCE DE LEON BLVD.

Suite, Apt. #, etc.

600

City & State

CORAL GABLES, FLORIDA

Zip

33134

Country

DADE

4. Date Incorporated or Qualified  
To Do Business in Florida

1/23/02

5. FEI Number

☒ 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

JORGE L. GURIAN

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

2100 PONCE DE LEON BOULEVARD

Suite, Apt. #, Etc.

SUITE 600

City

CORAL GABLES, FLORIDA

State

FL

Zip Code

33134

400028402194  
02/09/04--01026--014 \*\*300.00

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 1/22/04

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 Officers and/or Director	City/State/Zip
PSD	JUAREZ, FREDDDY A.	2100 PONCE DE LEON BLVD. SUITE 600	CORAL GABLES, FL 33134

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:

*Freddy Juarez*

FREDDY A. JUAREZ

1/22/04

786-326-2269

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

# Jorge L. Gurian, P.A.

January 22<sup>nd</sup>, 2004

Division of Corporations  
State of Florida  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Juarez-Nunes Properties, Inc. (P02000008428)

To Whom It May Concern:

Enclosed please find the Corporate Re-Instatement form for Juarez-Nunes Properties, Inc. The annual report had not been filed previously because the principal officer/director had never received the renewal package during calendar year 2003. Upon becoming informed of the need to file a Uniform Business Report, he of course was willing to comply with same and as such we provide the enclosed in conjunction with payment for the year 2003 and 2004.

We therefore respectfully request that you accept this filing as timely and classify the corporation as active and in accordance with the rules and regulations of the State of Florida. In addition, we have taken measures to ensure that this issue does not occur in subsequent years by correcting the address for the company and the registered agent information.

Thank you very much for your anticipated understanding and cooperation in this matter.

Very truly yours,

  
JORGE L. GURIAN

  
FREDDY A. JUAREZ

Enclosure