

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P02000023404**

1. Corporation Name

PROPERTY 4 CASH, CORP.

Principal Place of Business

Mailing Address

**4360 SW 97TH PLACE
MIAMI FL 33165**

**4360 SW 97TH PLACE
MIAMI FL 33165**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/01/2002

5. FEI Number

73-1630319

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSTD	BLANCO, PABLO A	4360 SW 97TH PLACE	MIAMI FL 33165

**800024393318
11/04/03--01008--004 **150.00**

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**BLANCO, PABLO A
4360 SW 97TH PLACE
MIAMI FL 33165**

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

[Signature of Pablo A. Blanco]

Date

REGISTERED AGENT MUST SIGN

11. 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:

[Signature of Pablo A. Blanco]
PABLO A. BLANCO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/16/03

Daytime Phone #

CR2E040 (7/03)

PROPERTY 4 CASH, CORP.
4360 S.W. 97TH PLACE
MIAMI, FLORIDA 33165

October 16, 2003

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

Re: Annual Report 2003
73-1630319

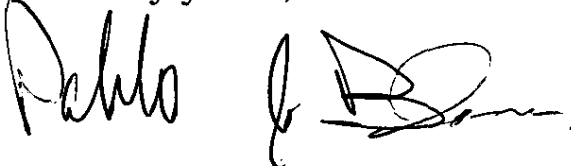
Dear Sir or Madam:

Please be advised that I did not receive the annual report until today's notice.

Attached you will find my check in the amount of \$150.00 to put my account current.

Thank you in advance in regards to this matter.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Pablo A. Blanco', followed by a stylized flourish or second signature.

PABLO A. BLANCO, PRES.