

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000026224

1. Corporation Name:

LOTUS HOMES, INC.

1410 N. PINE HILLS ROAD
1654 CASTLE HILL AVENUE

2. Principal Office Address

1410 N. PINE HILLS ROAD

3. Mailing Office Address

1654 CASTLE HILL AVENUE

Suite, Apt. #, etc.

GROUND FLOOR

Suite, Apt. #, etc.

GROUND FLOOR

City & State

ORLANDO, FLORIDA

City & State

BRONX, NEW YORK

Zip

32808

Country

ORANGE

Zip

10462-4239

Country

BRONX

REINSTATEMENT 03-09

900036960609
05/20/04--01036--026 **300.00

**4. Date Incorporated or Qualified
To Do Business in Florida** 3/8/02

5. FEI Number
75-3065265

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

BALWAN R. SINGH

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

1410 N. PINE HILLS ROAD

Suite, Apt. #, Etc.

GROUND FLOOR

City

ORLANDO, FLORIDA

State

FL

Zip Code

32808

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

REGISTERED AGENT MUST SIGN

Date 5/11/2004

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
MR.	BALWAN R. SINGH	1654 CASTLE HILL AVENUE	BRONX, NEW YORK 10462

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/2004

Date

407-947-2222

Daytime Phone #

CR2001 (07/04)

Lotus Homes, Inc.

Mailing Address:
1654 Castle Hill Avenue
Ground Floor
Bronx, New York 10462-4239
Phone: (407) 947-2222

May 11th, 2004

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

Dear Sir/Madam:

I am hereby kindly requesting that you reinstate the registration status of the corporation: Lotus Homes, Inc. which was administratively dissolved by the Department of State. The reinstatement fee of \$300 is enclosed. We hope that you will waive all other fees since the forms were never received by the corporation.

Please be advised that the correspondence from the Department of State re the 2003 forms were never received by us. We are therefore requesting that you waive the \$600 fee.

Please note our new mailing address above.

I look forward to your cooperation in this matter and thank you for your kind attention to this matter..

Thank you.

Yours Truly,



Balwan R. Singh