

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAY -2 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P02000065821*

1. Corporation Name

ATLANTIC REAL ESTATE CORPORATION

2. Principal Office Address

1520 N. M ST.

Suite, Apt. #, etc.

City & State

LAKE WORTH, FL

Zip

33460

Country

USA

3. Mailing Office Address

1520 N. M STREET

Suite, Apt. #, etc.

City & State

LAKE WORTH, FL.

Zip

33460

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

04-3697524

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

MICHAEL A SCHELLING

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

1520 NORTH M ST.

Suite, Apt. #, Etc.

City

LAKE WORTH

State

FL

Zip Code

33460

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

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
<i>PST</i>	<i>MICHAEL A. SCHELLING</i>	<i>1520 NORTH M ST</i>	<i>LAKE WORTH, FL 33460</i>

REINSTATEMENT

03-01

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED01 (10/02)

PAYOR

Fletcher Accounting and Tax Service, Inc.

11 North J Street, Suite 5
Lake Worth, Florida 33460
(561) 586-7110 • Fax (561) 533-0870

April 28, 2004

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

Re: Atlantic Real Estate Corporation
Uniform Business Report
Document #P0200065821

Attn: Tyrone Scott

Dear Mr. Scott;

Enclosed you will find a completed reinstatement form for Atlantic Real Estate Corporation. On January 12, 2003 we mailed in the UBR renewal form with a check for \$150.00 which was cashed by the State of Florida on January 17, 2003. We never heard anything so thought all was well. When checking the internet recently, we discovered that the Corporation is listed as inactive.

Please waive any penalties and fees. We have enclosed a check for \$150.00 for the 2004 report.

Thanking you in advance for your help.

Sincerely,



Cynthia Fletcher
Atlantic Real Estate Corporation

Enclosures: 1