

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

03 OCT 29 AM 11:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000080383

1. Corporation Name

PAN AMERICAN REALTY & FINANCIAL CONSULTANTS INC.

Principal Place of Business

6017-C  
5925-B WINEGARD RD.  
SUITE C  
ORLANDO FL 32809-487

Mailing Address

6017  
5925-B WINEGARD RD.  
SUITE C  
ORLANDO FL 32809-487

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

07/24/2002

5. FEI Number

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	MARQUEZ, PIERRE R	6017-C 5925-B WINEGARD RD.	ORLANDO FL 32809

600024253576

10/29/03--01053--023 \*\*150.00

8. Name and Address of Current Registered Agent

MARQUEZ, PIERRE R  
5925-B WINEGARD RD.  
SUITE C  
ORLANDO FL 32809-487

9. Name and Address of New Registered Agent

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 Pierre R. Marquez*  
REGISTERED AGENT MUST SIGN

Date 10-

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 Pierre R. Marquez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

10-

407-858-0453



**PAN AMERICAN REALTY  
FINANCIAL CONSULTANTS**

6017 Winegard Rd.  
Suite C  
Orlando, FL 32809  
Phone (407) 858-0453  
Piero99@earthlink.net

**October 21, 2003**

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

**To whom it may concern,**

**This is to advise you that the company never receive the two prior uniform business report notices.**

**Please notice that our mailing address has changed to 6017 Winegard Rd. Suite C, Orlando FL, 32809.**

**Enclosed please find the fee to file the report without penalty of \$150.00**

**Sincerely,**

  
**Pierre Marquez  
President**