

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
03 NOV -6 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000083020

1. Corporation Name

IVG INVESTMENTS CORP.

2. Principal Office Address

Suite, Apt. #, etc.

1254 Canary Island Dr.

City & State

Weston, Florida

Zip

33327

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

1254 Canary Island Dr.

City & State

Weston, Florida

Zip

33327

Country

USA

REINSTATEMENT *03*

**4. Date Incorporated or Qualified
To Do Business in Florida**

07-31-2002

5. FEI Number

APPLIED

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

HERNANDO VILLALBA

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

700024475177
11/06/03--01015--009 **\$150.00

Suite, Apt. #, Etc.

1254 Canary Island Dr.

City

Weston, Florida

State

FL

Zip Code

33327

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 10-31-03

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 Officer and/or Director	City / State / Zip
PTD	HERNANDO VILLALBA	1254 Canary Island Dr.	Weston, FL 33327
VSD	MYRIAM E. GARCIA	1254 Canary Island Dr.	Weston, FL 33327

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:

HERNANDO VILLALBA

10-31-03

305-431-2115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)

Miami, October 3rd , 2003

**Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314**

**Re: IVG INVESTMENTS CORP.
Doc Number P02000083020**

Dear Sir or Madam:

Please find enclosed an application for reinstatement with our new address.

We have never received the 2003 Uniform Business Report. We think it was sent to a different location.

We are enclosing a check for \$150 to cover the following fees:

2003 Uniform Business Report

We want to ask you for consideration and waive the penalty for reinstatement of our organization, which was incorporated in 2002.

Your consideration will be greatly appreciated.

Sincerely,



**Hernando Villalba
President**

**1254 Canary Island Dr.
Weston, FL 33327**