

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
CLERK OF STATE
CORPORATION

03 DEC -3 PM 2:09

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000086538

1. Corporation Name

Heavenly Grounds, Inc.

2. Principal Office Address

2530 SW 17 STREET

3. Mailing Office Address

same

Suite, Apt. #, etc.

none

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Zip

33145

Country

U.S.

Zip

Country

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

08-09-02

5. FEI Number

01-0751726

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

REINSTATEMENT

03

7. Name and Address of Current Registered Agent

Name

Patricia Yambó

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

2530 SW 17 STREET

Suite, Apt. #, Etc.

none

City

Miami

State
FL

Zip Code

33145

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]

Date

12-2-03

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
DP	PATRICIA YAMBÓ	2530 SW 17 STREET	Miami, FL 33145
DVS	ROBERTO YAMBÓ	2530 SW 17 STREET	Miami, FL 33145

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

12-2-03

Date

Daytime Phone #

HEAVENLY GROUNDS, INC.
2530 S.W. 17 STREET
FT. LAUDERDALE, FLORIDA 33145

December 2, 2003

Florida Department of State
Division of Corporations

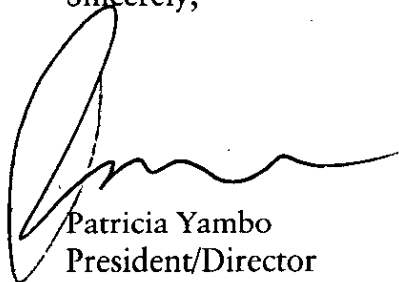
Re: **Heavenly Grounds, Inc.**
Document # P02000086538

To Whom It May Concern,

As per my telephone conversation with your office, please accept this letter as a waiver to the penalty on my corporation. I did not receive the Uniform 2003 form by mail. Furthermore, enclosed please find a money order number 43696271619 in the amount of \$150.00 for my annual fee.

Thank you in advance for your attention in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Patricia Yambo', with a large, stylized initial 'P'.

Patricia Yambo
President/Director