

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN 14 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000112615

1. Corporation Name

NICOMI PROPERTIES, INC.

3924 E. COQUINA WAY
3924 E. COQUINA WAY

2. Principal Office Address

3924 E. COQUINA WAY

Suite, Apt. #, etc.

3. Mailing Office Address

3924 E. COQUINA WAY

Suite, Apt. #, etc.

City & State

WESTON, FLORIDA

City & State

WESTON, FLORIDA

Zip

33332

Country

USA

Zip

33332

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 10/18/2002

5. FEI Number

30-0255157

☒ 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

GARY SILBER

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

3924 E. COQUINA WAY

Suite, Apt. #, Etc.

City

WESTON

State

FL

Zip Code

33332

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 JUNE 4, 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
P	GARY SILBER	3924 E. COQUINA WAY	WESTON, FL. 33332

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

June 4, 2004 954 384 4436

Date

Daytime Phone #

252

Nicomi Properties, Inc.
Gary Silber
3924 E. Coquina Way
Weston, Fl. 33332

Dept. of State
Division of Corporations
409 E. Gaines St.
Tallahassee, Fl. 32399

Ref: P02000112615

June 4, 2004

Dear Sir/Madame,

I am requesting that the re-instatement fee of \$600.00 be waived due to not receiving the annual report. I actually am using the corporate name for the first time in the purchase of a real estate property and when asked for the EIN number I noticed the corporation was dissolved as per www.sunbiz.com. Therefore I believe I owe you \$300.00 enclosed for last year and this year (\$150.00 per year)

I thank you very much for complying with my request and I also want to be sure you have my new address as noted above.

Please expedite the re-instatement as time is a matter of urgency with the using of the corporate name.

Should you have any questions do not hesitate in asking at PH 954-673-2600 my cell.

Thank you and Best Regards,

Gary Silber

