

FLORIDA DEPARTMENT OF STATE

APPLICATION
FOR
REINSTATEMENTSecretary of State
DIVISION OF CORPORATIONSDOCUMENT # P02000116930
1. Corporation Name

Luxury Vacation, Inc.

FILED
- SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP -6 AM 8:50

REINSTATEMENT 03-06

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified

10/30/2002

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

21 550 11TH ST.

26 550 11TH ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Miami Beach FL

28 Miami Beach FL

Zip

County

Zip

County

24 33139

25 Miami-Dade

29 33139

30 Miami-Dade

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under
s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81

Name
JOHN M MCDANIEL, ESQ.

82

Street Address (P.O. Box Number is Not Acceptable)
2 SOUTH BISCAYNE BLVD., SUITE 2975

83

84

City
MIAMI

FL

85

Zip Code
33131

11. Pursuant to the provisions of Sections 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

JOHN M MCDANIEL, ESQ. by T. Baez as attorney-in-fact

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPPresident
Christophe Brayer
550 11TH ST.
Miami Beach, FL 33139☐ Change☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPDirector
Christophe Brayer
550 11TH ST.
Miami Beach, FL 33139☐ Change☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition
 100079730181
 09/12/06--01062--002 **500.00
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, or an attachment with an address.

SIGNATURE

Christophe Brayer, Director by T. Baez as attorney-in-fact 09/05/2006 305-672-0686

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Florida Department of State
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Luxury Vacation, Inc.


Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. check payable to Florida Department of State

We never received the Uniform Business Report for the following year(s) that should have been mailed to us:

2003, 2004, 2005, 2006

Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By:  Christopher Brayer, Director - T. Baez as attorney in fact

Name: Taide Baez

Title: _____

Date: 4/5/06