

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 NOV 22 AM 10:47

DOCUMENT # PO2000124307

1. Corporation Name

GLOBAL LAND HOLDING INC.

**REINSTATEMENT**

03-04

400042927084

11/22/04--01052--003 \*\*750.00

4/14/03 90043 022 150.00

2. Principal Office Address

8084-WEST 21CT

Suite, Apt. #, etc.

BL 10C

3. Mailing Office Address

9624 NOTRE DAME

Suite, Apt. #, etc.

City & State

HIATLEAH Florida

Zip

33016

Country

USA

City & State

MONTREAL QUEBEC

Zip

H1L 3P6 CANADA

Country

CANADA

4. Date Incorporated or Qualified  
To Do Business in Florida

11-21-2002

5. FEI Number

65-1204719

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

FRANCIS X. SANTANA

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

COURT HOUSE PLAZA 28 WEST FLAGLER STREET

Suite, Apt. #, Etc.

SUITE 400

City

MIAMI Florida

State

FL

Zip Code

33130

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

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
D	Cecilio Lopez Perez	8084 WEST 21CT BL 10C	HIATLEAH Florida 33016
D	ARMANDO HERNANDEZ	8084 WEST 21CT BL 10C	HIATLEAH Florida 33016

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:

Cecilio Lopez Perez  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/11/004 305-233-4904  
Daytime Phone #

CR2E081 (01/04)