

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAY -6 AM 5:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000124835

1. Corporation Name

BEST PROPERTY TITLE SERVICES, INC.

2. Principal Office Address

12515 N. Kendall Drive

Suite, Apt. #, etc.

314

City & State

Miami, FL

Zip

33186

Country

US

3. Mailing Office Address

12515 N. Kendall Drive

Suite, Apt. #, etc.

314

City & State

Miami, FL

Zip

33186

Country

US

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

5. FEI Number

48-1297940

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

Z. PAOLA GUERRERO, P.A.

Street Address (P.O. Box Number is Not Acceptable)
12515 N. Kendall Drive

Suite, Apt. #, Etc.

314

City

Miami, FL

State

FL

Zip Code

33186

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 04/29/04

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 T | Z. Paola Guerrero | 12515 N. Kendall Drive, Suite 314 | Miami, FL 33186 |
| VP S | John M. Thomson | 370 Minorca Ave., Suite 1 | Coral Gables, FL 33134 |
| | | | |
| | | | |
| | | | |
| | | | |

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

04/29/04

Date

305 279-1000

Daytime Phone #

CR2E081 (01/04)

R. STE.

143

DATE: 05/30/2003

PAGE

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Z. PAOLA GUERRERO, P.A.
OPERATING ACCOUNT
12515 N. KENDALL DR., STE. 314
MIAMI, FL 33186
PH. (305) 279-1000

EASTERN NATIONAL BANK
12501 N. KENDALL DR.
MIAMI, FL 33183
63 25301
620

80107943

2399

4/30/2003

PAY TO THE ORDER OF Florida Department of State

\$ 150.00

One Hundred Fifty and 00/100

DOLLARS

FOR Best Property Title Services, Inc.
2002 Annual Filing Fees

⑈00239⑈ ⑈067002533⑈

⑈00208470⑈

⑈015000⑈

399

150.00

1092

Z. Paola Guerrero, P.A.

Attorney at Law

12515 N. Kendall Drive, Suite 314

Miami, Florida 33186-1870

Telephone (305) 279-1000

Facsimile
(305) 279-7800

email
law@paolaguerrero.com

April 30, 2004

Sent via U.S. Mail-Certified Return Receipt-
7002 3150 0001 5422 2282

Division of Corporations
2670 Executive Center Circle, Suite 100
Tallahassee, FL 32301

RE: Best Property Title Services, Inc.

Dear Sir or Madam:

Enclosed herewith please find check number 2703 in the amount of \$150.00 for the 2004 Annual UBR. Kindly process the enclosed Reinstatement Application.

Additionally, please note the appropriate filing fee for 2003 was sent on a timely fashion and the payment cleared our bank account. For your convenience please find evidence of same. Furthermore, kindly waive any fees that may be due since we did not receive the correspondence sent on May 22, 2003 and July 16, 2003.

Should you have any questions or comments, please don't hesitate to contact me.

Very truly yours,


Z. Paola Guerrero, Esq.

PG/afs