

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 APR -2 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000003284

1. Corporation Name

HRV Concepts, Corp.

2. Principal Office Address - No P.O. Box #

2875 NE 191 ST

Suite, Apt. #, etc.

201

City & State

Miami, FL

Zip

33180

Country

USA

3. Mailing Office Address

8325 NW 53 ST

Suite, Apt. #, etc.

102

City & State

Miami, FL

Zip

33166

Country

USA

CR2E081 (1/07)

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

32-0052023

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

Jose F. Padro

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

8325 NW 53 Street

Suite, Apt. #, Etc.

Suite 102

City

Miami

State

FL

Zip Code

33166

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Jose F. Padro

REGISTERED AGENT MUST SIGN

Date

3/24/07

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
PD	Hector Valdivia	2875 NE 191 ST	Aventura, FL 33180

REINSTATEMENT

04-07

B4/S/07

400098329084
04/10/07--01027--004 **600.00

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 contained in Chapter 119, 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

Hector Valdivia Hector Valdivia, Pres.

Date

03.27.07

Daytime Phone #

HRV Concepts, Corp.
786-787-0350
786-787-0333
2875 NE 191 ST
Suite 201
Aventura, Florida 33180
hvaldivia@islasperu.com

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March 28, 2007

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Re-instatement for 2004

As per our conversation by phone, find the following information:

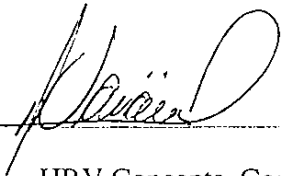
- a) Check for 600.00 payable to Florida Department of State for the years 2004, 2005, 2006 & 2007
- b) Copy of the Name Change and Address Change filed on 01-24-2003

Please note that the 2004 UBR was never received in our offices, due to this reason, we respectfully request to waive any re-instatement penalty.

If you have any question feel free to contact our offices at the above numbers.

Thank you for your cooperation.

Sincerely,



HRV Concepts, Corp.