ATTACHMENT 1 OF 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 MAY -9 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000028785

1. Corporation Name
BORDON & BORDON, CORP.

REINSTATEMENT 06-08 KS
CR2E08-F(12/07)

2. Principal Office Address - No P.O. Box #		**3.** Mailing Office Address	
2511 SW 67 AVE		6333 SW 32 ST	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
MIAMI		MIAMI	
Zip	Country	Zip	Country
33155	USA	33155	USA

4. Date Incorporated or Qualified To Do Business in Florida 03/12/2003

5. FEI Number 020683445 ☐ 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 L BORDON

Street Address (P.O. Box Number is Not Acceptable)
6333 SW 32 ST

Suite, Apt. #, Etc.

City: MIAMI | State: FL | Zip Code: 33155

☑ 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 _____ Date _____
REGISTERED AGENT MUST SIGN

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	JOSE L BORDON	6333 SW 32 ST	MIAMI, FL 33155

200129432602
05714/08--01008--021 **450.00

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 — Date — Daytime Phone #

DEPARTMENT OF STATE
Division of corporations.

To whom it may concern

I Jose L Bordón, president of Bordón & Bordón corp am writing this letter to ask you to accept my payment for the annual report of the above mentioned corporation.

The reason of the delay is that I never the report notice, I did not know I was supposed to send it before may 1st. I just found out about it.

Please accept my apology and my payment.

Sincerely

Jose L Bordon.