


2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAR 20 AM 11:50

DOCUMENT # P04000055201

1. Entity Name
FERNWOOD TOWNHOMES, INC.



Principal Place of Business Mailing Address

2. Principal Place of Business **11010 NW 30 STREET**

3. Mailing Address **P.O. BOX 025323**

Suite, Apt. #, etc. **SUITE 104 CCS3377**

Suite, Apt. #, etc. **CCS 3377**

City & State **MIAMI, FLORIDA**

City & State **MIAMI, FLORIDA**

Zip **33172** Country **USA**

Zip **33102** Country **USA**

REINSTATEMENT 05-06



03032006 REIN-P CR2E098 (11/05)

4. FEI Number **41-2169849**

Applied for Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GOMEZ, CESAR
260 CRANDON BLVD., UNIT 14
KEY BISCAIYNE, FL 33149

7. Name and Address of New Registered Agent

Name _____

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

City **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORELLANA, LEO 4440 NW 73 AVE., SUITE 3377 MIAMI, FL 33166 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALEXANDRA DIAZ, MARIA 4440 NW 73 AVE., SUITE 3377 MIAMI, FL 33166 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300069051593 03/30/06--01043--004 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FERNWOOD TOWNHOMES, INC.
P.O. BOX 025323 CCS 3377
MIAMI, FLORIDA 33102

March 16, 2006

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

Re: Document # P04000055201

Dear Representative:

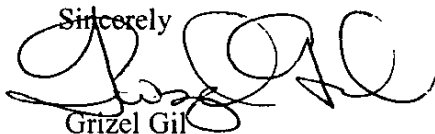
Enclosed please find a 2006 "FOR PROFIT CORPORATION REINSTATEMENT" for Fernwood Townhomes, Inc. for processing. I have also enclosed a check in the amount of \$300.00 to cover the filing fee. We respectfully request the waiver of the reinstatement fee due to the fact that the Uniform Business Report was not received.

Please note the new mailing address for Fernwood Townhomes, Inc. is as follows:

Fernwood Townhomes, Inc.
P.O. Box 025323
CCS 3377
Miami, FL 33102

If you have any questions or require additional information regarding this matter, please do not hesitate to contact Grizel Gil at 305-441-1012 ext. 235.

Sincerely



Grizel Gil