

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JAN 17 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 04000057763

1. Corporation Name

ABBOTT PLACE, CORP.

200085640962
01/23/07--01005--016 ***450.00

2. Principal Office Address
9308 Abbott Avenue

Suite, Apt. #, etc.

City & State
Surfside,

Zip
33154

Country
USA

3. Mailing Office Address
Same

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida** 04/02/2004

5. FEI Number

☐ 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
Ratko Kravljanc

Street Address (P.O. Box Number is Not Acceptable)
9308 Abbott Avenue

Suite, Apt. #, Etc.

City
Surfside,

State
FL

Zip Code
33154

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**

Ratko Kravljanc
REGISTERED AGENT MUST SIGN

Date 01/12/2007

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	Ratko Kravljanc	9308 Abbott Avenue	Surfside, FL 33154
VDSD	Branislava Kravljanc	9308 Abbott Avenue	Surfside, FL 33154
TD	Gloria Salom	815 North Shore Drive	Miami Beach, FL 33141

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:

Branislava Kravljanc
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/12/07

Date

305 868-7546

Daytime Phone #

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ABBOTT PLACE CORP.
9308 Abbott Avenue
Surfside, FL 33154

January 12, 2007

Re: Reinstatement of Abbott Place Corp
Document #P04000057763

To whom it may concern:

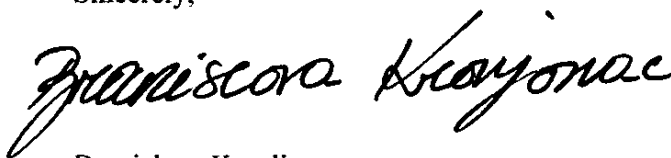
Please be advised that we never received the annual report renewal notice in year 2005 .

Please be so kind in waiving the reinstatement fee.

We have enclosed a check in the sum of \$450.00 dollars to cover year(s) 2005, 2006 and 2007.

Thank you for your attention in this matter. If you should need any additional information please feel free to contact the undersigned at (305) 868-7546. or 786-287-3618.

Sincerely,

A handwritten signature in black ink, reading "Branislava Kravljjanac". The signature is written in a cursive, flowing style.

Branislava Kravljjanac
Vice President