## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000164642

Address:

City-St-Zip:

P.O. BOX 823212

PEMBROKE PINES, FL 33028 US

FILED Dec 06, 2005 Secretary of State

Entity Na	me: LAKEVII	EW PROF	PERTIES REALTY INC	O.					
Current Principal Place of Business:					New Principal Place of Business:				
P.O. BOX	823212			1	0021 PINE	S BLVD.			
PEMBRO	KE PINES, FL	. 33028	US		01 EMBDOKE	EDINIES EI	33024	US	
Current Mailing Address:					PEMBROKE PINES, FL 33024 US  New Mailing Address:				
Current IV	iailing Addre	ess:		r	iew maiiin	ig Address	•		
P.O. BOX PEMBRO	823212 KE PINES, FL	. 33028	US						
FEI Number	: 20-1993486	FEI Nui	mber Applied For ( )	FEI Numb	er Not Applic	cable ( )	Certifica	te of Status Desired()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:				
<b>UNIT 102</b>	IORGE 160TH AVE. 1, FL 33027 L	JS							
	e named entity e of Florida.	/ submits t	his statement for the	purpose of o	changing its	s registered	office or r	egistered agent, or both,	
SIGNATUI	RE: JORGE	AMARO							
Electronic Signature of Registered Agent					Date				
		. , . , ,	S., the corporation did n nd Contribution ( ).	ot receive the	prior notice	).			
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PRES ( AMARO, JOR P.O. BOX 823 PEMBROKE F	3212	33028 US	۸ <u>م</u>	itle: lame: ddress: tity-St-Zip:	1	( ) Change(	( ) Addition	
Title: Name: Address:	SECR ( PEREZ, LUIS P.O. BOX 823			N	itle: lame: .ddress:	SECR MEYERS, MI P.O. BOX 82		( ) Addition	
City-St-Zip:	PEMBROKE I	PINES, FL 3	3028 US	C	ity-St-Zip:	PEMBROKE	PINES, FL 3	33028 US	
Title: Name: Address: City-St-Zip:	TREA ( AMARO, CAR P.O. BOX 823 PEMBROKE F	3212	33028 US	۸ <u>م</u>	itle: lame: .ddress: city-St-Zip:	1	( ) Change(	( ) Addition	
Title: Name:	DIR (. MEYERS, MIC	X) Delete CHAEL			itle: lame:	ı	( ) Change (	( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JORGE AMARO **PRES** 12/06/2005