

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 APR 10 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P07000126869

1. Corporation Name
PANTHER PROPERTIES + INVESTMENTS INC

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

218B JUPITER ST

Suite, Apt. #, etc.

City & State

JUPITER FL

Zip

33458

Country

USA

3. Mailing Office Address

218B JUPITER ST

Suite, Apt. #, etc.

City & State

JUPITER FL

Zip

33458

Country

USA

100149460721
04/10/09--01031--029 **150.00

REINSTATEMENT 08-09

4. Date Incorporated or Qualified
To Do Business in Florida

11/28/07

5. FEI Number

41-2268206

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

RHODA D. TRENT

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

218B JUPITER ST

Suite, Apt. #, Etc.

City

JUPITER

State

FL

Zip Code

33458

☒ 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

Rhoda D. Trent

Date

4/7/09

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
0	<u>RHODA D. TRENT</u>	<u>218B JUPITER ST</u>	<u>JUPITER FL 33458</u>

100149460721
04/10/09--01031--030 **150.00

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:

Rhoda D. Trent RHODA D. TRENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/09

Date

561-575-1968

Daytime Phone #