

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 94-97
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 MAR 31 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000013086

1. Corporation Name

Boca First Realty, Inc.

Principal Place of Business

Mailing Address

1975 SW 10 Street
Boca Raton, Florida 33486

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida Feb. 23, 1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number	
City & State		City & State		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P-D	BRADLEY D. LITHE	1975 SW 10 STREET	Boca Raton, FL 33486
T-D	IRIS B. LITHE	1975 SW 10 STREET	Boca Raton, FL 33486
D	ALICE BAREN	3420 S. OCEAN DRIVE PH-Y	Highland Beach, FL 33417

REINSTATEMENT 94-97
G. Alan
3/31/97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BRADLEY D. LITHE
1975 SW 10 STREET
Boca Raton, FL 33486

Name	
Street Address (P.O. Box Number is Not Acceptable)	900002131463--6
Suite, Apt. #, Etc.	-04/02/97--01076--013
City	***1245.00 ***1245.00
State	FL
Zip Code	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

BRADLEY D. LITHE
REGISTERED AGENT MUST SIGN

Date 3/25/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. 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 under section 119.07(3)(i), 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

BRADLEY D. LITHE

Date

3/25/97

Daytime Phone #

561-338-0238

CR20040 (1/2/96)