

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC 19 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000019963

1. Corporation Name

Gregory A. Moore, P.A.

2. Principal Office Address

15225 NW 77th Avenue

Suite, Apt. #, etc.

First Floor

City & State

Miami Lakes, FL.

Zip

33014

Country

USA

3. Mailing Office Address

15225 NW 77th Avenue

Suite, Apt. #, etc.

First Floor

City & State

Miami Lakes, FL.

Zip

33014

Country

USA

000009602450
12/19/02--01086--009 **900.00

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

March 15, 1993

5. FEI Number

65-0396981

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

Gregory A. Moore

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

15225 NW 77th Avenue

Suite, Apt. #, Etc.

First Floor

City

Miami Lakes

State

FL

Zip Code

33014

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

Gregory A. Moore
REGISTERED AGENT MUST SIGN Gregory A. Moore

Date 12-18-02

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
P	Gregory A. Moore	15225 NW 77th Avenue 1st Floor	Miami Lakes, FL. 33014

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 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:

Gregory A. Moore, President Gregory A. Moore 12-18-02 305-557-3161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)