PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.							
FOR 95			A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Invision of Corporations		AND FILED 1998 HAR LO PM 1: 41		
DOCUMENT # P930000 46545  1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
FV Properties, Inc.							
Principal Place of Business 3000 N.E. 20 Court St. Lauderdale, F1. 33305  Mailing Address 3000 N.E. 20 Court Ft. Lauderdale, F1. 33305  Ft. Lauderdale, F1. 33305						••••••••••••••••••••••••••••••••••••••	
	ddresses are incorrect in any way, line thr ncipal Office Address. If Applicable	ng Office Address, If Applicable		Date Incorp.	orated or Qualified		
Suite, Apt. #, etc. Suite, Apt. #,			etc.			July 1, 1993	
City & State City & Sta					5. FEI Number 65-	-0420481 Applied For Not Applicable	
<b>Z</b> ip	Country	Zip	Coun	try	6. CERTIFICATE	S8.75 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)  Name of Officers Street Address of Each							
Title(s)	Title(s) and/or Directors		Officer and/or Director 3 (Do NOT Use Post Office Box N		umbers)	City / State / Zip	
P, D Van Dyck, Frederik			3000 N.E. 20 Court		·	Ft. Lauderdale; Fl. 33305	
						000024547568 -03/12/9801010006 ***1208.75 ************************************	
					REINS	TATEMENT 36 150 PR	
	8. Name and Address of Current F	Registered Age	nt	T	9. Name and A	ddress of New Registered Agent	
Cara Ebert Cameron							
Cara Ebert Cameron, P.A. Street Address (P					O. Box Number is Not Acceptable)		
310 Ft.	1 North Federal Highw Lauderdale, Fl. 333	Suite, Apt. #, Etc.		<del> </del>			
City						State 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 Date REGISTERED AGENT MUST SIGN  Date March 9, 1998							
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.  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 filling 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: Frederik Van Dyck, President 3/9/98 954-561-5392  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date Date Date Date Date Date Date Date							

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