

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # **P94000039152**

1. Corporation Name

**GLOBAL REAL PROPERTIES, INC.**

FILED

96 NOV 25 AM 9: 28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

169 E. FLAGLER ST.  
SUITE 700  
MIAMI FL 33131

169 E. FLAGLER ST.  
SUITE 700  
MIAMI FL 33131

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

2. New Principal Office Address, If Applicable

**9301 SW 56 Street**

3. New Mailing Office Address, If Applicable

**9301 SW 56 Street**

Suite, Apt. #, etc.

**Suite D**

Suite, Apt. #, etc.

**Suite D**

City & State

**Miami, FL**

City & State

**Miami, FL**

Zip

**33165**

Country

**USA**

Zip

**33165**

Country

**USA**

REINSTATEMENT **910**

4. Date Incorporated or Qualified  
To Do Business in Florida

**05/17/1984**

5. FEI Number

**65-0482268**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

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

| 1<br>Title(s) | 2<br>Name of Officers<br>and/or Directors | 3<br>Street Address of Each<br>Officer and/or Director<br>(Do NOT Use Post Office Box Numbers) | 4<br>City / State / Zip |
|---------------|---|--|-------------------------|
| DP            | HERNANDEZ, LUZ M                          | 5820 SW 91ST AVE.  | MIAMI FL 33173          |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |

**800002016598--3**  
**-12/02/96--01007--021**  
**\*\*\*375.00 \*\*\*375.00**

8. Name and Address of Current Registered Agent

SMITH, ROBERT B JR  
169 E. FLAGLER ST.  
SUITE 700  
MIAMI FL 33131

9. Name and Address of New Registered Agent

Name **LUZ M Hernandez**  
Street Address (P.O. Box Number is Not Acceptable)  
**9301 SW 56 Street**  
Suite, Apt. #, Etc. **Suite D**  
City **Miami** State **FL** Zip Code **33165**

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

**SIGNATURE REQUIRED**

Date

**11/20/96**

REGISTERED AGENT MUST SIGN

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 REQUIRED**  
**LUZ M Hernandez**

Date

**11/20/96 (305) 279-6710**

Daytime Phone #