

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUL 19 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000051792
1. Corporation Name M. LUDY GROSSO, P.A.

2. Principal Office Address 3. Mailing Office Address

2625 COLLINS AVENUE
Suite, Apt. #, etc. # 1408

City & State MIAMI BEACH, FL

Zip 33140 Country USA

Suite, Apt. #, etc.

City & State

Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida 7/5/95

5. FEI Number 65-0606707

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 JORGE A. RODRIGUEZ CPA
Street Address (P.O. Box Number is Not Acceptable)
6401 SW 87th AVENUE
Suite, Apt. #, Etc. SUITE 210
City MIAMI

State FL Zip Code 33173

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

REGISTERED AGENT MUST SIGN

Date 7-12-04

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
PRES	MARIA LUDY GROSSO	2625 COLLINS AVE #1408	MIAMI BEACH, FL 33173

800039641218
07/28/04--01036--017 **150.00

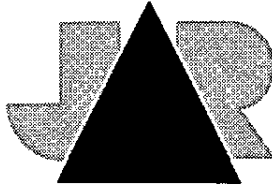
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the 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 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

7-12-04
Date

(305) 673-2371
Daytime Phone #



JORGE A. RODRIGUEZ & ASSOCIATES, P.A.

Certified Public Accountants & Business Consultants

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July 12, 2004

Secretary of State
Florida Department of State
R.A. Gray Building
500 S. Bronough
Tallahassee, FL 32399-0250

RE: M. Ludy Groso, P.A.
2625 Collins Avenue #1408
Miami Beach, FL 33140
FEIN: 65-0606707
Ref. No.: P95000051792

Dear sir/madam:

This letter is in response to your notice of dissolution. We kindly ask the State of Florida to reinstate M. Ludy Groso, P.A. (EIN 65-0606707) corporate status for the following reason:

- The corporation had a change of address and never received the Uniform Business Report. Therefore, she was unaware and uninformed and did not pay her corporate filing fee for 2004.

We thank you in advance and appreciate your consideration in this matter. If you have any further questions, please contact our office at (305) 595-1783 x. 267.

Sincerely,


Jorge A. Rodriguez, CPA
J.A. Rodriguez, CPA & Associates, P.A.