

10/26/98 13:23 FAX 9544912051

MOSKOWITZ, MANDELL, SALIM

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APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSAND
FILED

98 OCT 27 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA10000025781

1. Corporation Name

NATIONAL PROPERTY MANAGEMENT SERVICES, INC.

Principal Place of Business

Mailing Address

3030 East Commercial Blvd Suite 55
Fort Lauderdale, Florida 33308100002674881--3
-10/28/98-01085-006
****750.00 ****750.00

REINSTATEMENT 98

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

2. New Principal Office Address, If Applicable
Same as above

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

March 21, 1996

5. FEI Number

65-0689847

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	Vincent Lake	4320 NE 21st Ave.	Fort Lauderdale, FL 33308
VP	Jennifer Fernandez	457 Woodlake Lane	Deerfield Beach, FL 33442
S/T	Hellen Ellison	9431 Live Oak Place	Fort Lauderdale, FL 33325

8. Name and Address of Current Registered Agent

Corporate Service Company
1201 Hays Street
Tallahassee, FL 32301

9. Name and Address of New Registered Agent

Name

Vincent Lake
Street Address (P.O. Box Number is Not Acceptable)
4320 NE 21st Avenue
Suite, Apt. #, Etc.

City

Fort Lauderdale,

State

FL

Zip Code

33308

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

REGISTERED AGENT MUST SIGN

Date

10/26/98

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 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

Date

Daytime Phone #

10/26/98 (954) 439-5664