

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 97-98
REINSTATEMENT



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

APPROVED
AND
FILED

98 JAN 23 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000077725

1. Corporation Name

PREMIUM REAL ESTATE, INC.

Principal Place of Business
TWO SOUTH BISCAYNE BLVD.
SUITE 2975
MIAMI FL 33131

Mailing Address
TWO SOUTH BISCAYNE BLVD.
SUITE 2975
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

13036
19000 Mulberry Park Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Suite 424

City & State

City & State
Orlando, FL

Zip

Country

Zip
32821

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/18/1996

5. FEI Number

65-0695991

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
1 D	HANNES SCHOECKLER	13036 19000 MULBERRY PARK DRIVE # 424	ORLANDO / FL / 32821
2			200002415202--5 -01/28/98--01105--006 ****900.00 ****900.00

REINSTATEMENT

97-98

G. Alan
Jan. 23, 1998

8. Name and Address of Current Registered Agent

MACDANIEL, JOHN M ESQUIRE
ONE BISCAYNE TOWER, SUITE 2975
TWO SOUTH BISCAYNE BOULEVARD
MIAMI FL 33131

9. Name and Address of New Registered Agent

Name
Lawrence J. Chastang, Chastang, Ferrell et.al.
Street Address (P.O. Box Number is Not Acceptable)
1400 W. Fairbanks Ave., Ste. 102
Suite, Apt. #, Etc.
City
Winter Park,
State
FL
Zip Code
32789

10. I, being appointed the registered agent of the above named corporation, do hereby accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 1/8/98

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 #

1/8/98 (407) 827-7399