

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 OCT 25 PM 2:56

DOCUMENT # P96006092869

**1. Corporation Name**

COVENTRY HOMES, INC

**2. Principal Office Address**

1 S.E. 3 AVE

**Suite, Apt. #, etc.**

15<sup>th</sup> FLR

**City & State**

MIAMI, FL

**Zip**

33131

**Country**

USA

**3. Mailing Office Address**

**Suite, Apt. #, etc.**

**City & State**

**Zip**

**Country**

**4. Date Incorporated or Qualified  
To Do Business in Florida**

11-7-1996

**5. FEI Number**

65-0712838

**Applied For**

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

00-01 4BR

**7. Name and Address of Current Registered Agent**

**Name**

SANFORD B. MLOT

**Street Address (P.O. Box Number is Not Acceptable)**

1 S.E. 3 AVE

**Suite, Apt. #, Etc.**

15<sup>th</sup> FLR

**City**

MIAMI

**State**

FL

**Zip Code**

33131

**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**

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 10-18-01

**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
P/D	SANFORD B. MLOT	1 SE 3 AVE, 15 <sup>th</sup> FLR	MIAMI, FL 33131
			AD

**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]*

SANFORD B. MLOT

10-18-01

305-377-1800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (9/00)



2-  
**Berkshire Enterprises**  
One Southeast Third Avenue  
Fifteenth Floor  
Miami, Florida 33131

Tel: 305/377-1800  
Fax: 305/371-4622

Sanford B. Miot  
*President*

SENT VIA FEDERAL EXPRESS

October 18, 2001

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Coventry Homes, Inc. – FEI #65-0712838

Dear Sir/Madam:

Enclosed please find an executed Corporation Reinstatement Form for the above-mentioned corporation along with a check in the amount of \$300.00.

I am formally requesting that the \$600.00 reinstatement fee be waived. I have never received any forms or notices in the mail for this corporation and therefore I did not submit the proper fees and forms on a timely basis. The address for the corporation had been changed to the address listed above in Miami with the post office but nothing from the Department of State has been received regarding any forms or revocations relating to Coventry Homes, Inc.

Thank you in advance for your assistance with this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Sanford B. Miot", written over a horizontal line.

Sanford B. Miot

SBM/dcm  
enclosure