PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
01 JUN 28 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000025984

1. Corporation Name
Nation's Realty Group, Inc

2. Principal Office Address	3. Mailing Office Address
7805 SW 24 St	12074 SW 125 St
Suite, Apt. #, etc.: # 126	Suite, Apt. #, etc.:
City & State: Miami FL	City & State: Miami FL
Zip: 33155 Country: USA	Zip: 33186 Country: USA

REINSTATEMENT 00-01

4. Date Incorporated or Qualified To Do Business in Florida: 3/24/1997

5. FEI Number: 65-0769896 ☐ 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: Lissette B. Perez

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****908.75 ****908.75
LS

Street Address (P.O. Box Number is Not Acceptable): 1912 SW 17 avenue

Suite, Apt. #, Etc.: Suite N-19

City: Miami State: FL Zip Code: 33145

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: Lissette B. Perez Date: 6-27-01
REGISTERED AGENT MUST SIGN

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
PD	Lissette B. Perez	12074 SW 125 St	Miami FL 33186
TR	Lissette B. Perez	12074 SW 125 St	Miami FL 33186
VPD	Mario Sanchez Jr	12074 SW 125 St	Miami FL 33186
SEC	Mario Sanchez Jr	12074 SW 125 St	Miami FL 33186

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: Lissette B. Perez 6-27-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #