

APPLICATION  
FOR  
REINSTATEMENT



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 OCT -4 PM 4:05

DOCUMENT # P97000054085

1. Corporation Name

Condo Limo 1997 INC.

REINSTATEMENT 99

Principal Place of Business

Mailing Address

500 N. Dixie  
Hwy. Suite 3-4  
Hollywood, FL 33020

500 N. Dixie  
Hwy. Suite 3-4  
Hollywood, FL 33020

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

6/1/97

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0764978

Applied For

Not Applicable

City & State

City & State

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| 1. Title(s) | 2. Name of Officers and/or Directors | 3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4. City / State / Zip |
|-------------|--------------------------------------|----------------------------------------------------------------------------------------|-----------------------|
| P           | Ivan Ceperov                         | 55 S.E. 12 street                                                                      | Dania, FL 33004       |
|             |                                      |                                                                                        |                       |
|             |                                      |                                                                                        |                       |
|             |                                      |                                                                                        |                       |
|             |                                      |                                                                                        |                       |
|             |                                      |                                                                                        |                       |
|             |                                      |                                                                                        |                       |
|             |                                      |                                                                                        |                       |

300003007353--  
-10/06/99--01060--009  
\*\*\*750.00 \*\*\*750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Ivan Ceperov  
55 S.E. 12 street  
Dania, FL 33004

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of  
Registered Agent

*Ivan Ceperov*  
REGISTERED AGENT MUST SIGN

Date 9/6/99

11. This corporation owes 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:

*Ivan Ceperov*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ivan

Ceperov

9/6/99 926-6778  
Date Daytime Phone

Corporation