

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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

DOCUMENT # P97000054778

1. Corporation Name

AMERICAN HOMES REAL ESTATE, INC.

Principal Place of Business

5252 LAKE MARGARET DRIVE
SUITE 311
ORLANDO FL 32812

Mailing Address

5252 LAKE MARGARET DRIVE
SUITE 311
ORLANDO FL 32812

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

06/20/1997

5. FEI Number

59-3452965

Applied For

Not Applicable

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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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	LANDRY, GARY	5252 LAKE MARGARET DRIVE, SUITE	ORLANDO FL 32812

900002836689--7
-04/12/99--01128--005
****300.00 ****300.00

8. Name and Address of Current Registered Agent

LANDRY, GARY
5252 LAKE MARGARET DRIVE
SUITE 311
ORLANDO FL 32812

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

3/18/99

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

3/18/99

407-349-1133

Daytime Phone #

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Tuesday, March 30, 1999

Kathy
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Dear Kathy:

In reference to our telephone conversation on March 30, 1999.

This is a letter of explanation for not receiving the annual reports for the two enclosed corporations.

Unfortunately, being my first corporations I naively accepted the free assistance of a supposedly knowledgeable friend to take care of the these matters. *"I'll take care of all your corporate filings and renewals, you concentrate on the business."*

Needless to say this was a new comers mistake. I have sense personally taken over the book keeping aspect of both Companies and feel ashamed and humiliated of the current status of my State obligations. I sincerely apologize and would greatly appreciate relief of the reinstatement fees in order to regain the proper administrative handling of these two new corporations.

I have enclosed for your convenience a \$300.00 check for each of the Companies and truly thank you for this consideration.

Thank you again

Sincerely,



Gary Landry