

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P97000264881**

1. Corporation Name

CASA DEL SOL REALTY, INC.

FILED

02 MAR -4 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Office Address

620 E. COLONIAL DR

Suite, Apt. #, etc.

(SUITE 1)

ORLANDO, FLORIDA

City & State

ORLANDO, FLORIDA

Zip

32803

Country

ORANGE

3. Mailing Office Address

955 SONATA LANE

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

Zip

32825

Country

ORANGE

4. Date Incorporated or Qualified
To Do Business in Florida

7-24-1997

5. FEI Number

993464199

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

VICTOR ALVAREZ

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

955 SONATA LANE

Suite, Apt. #, Etc.

City

ORLANDO

400005168604-2

-03/26/02--01024--017

******308.75 ****308.75**

State

FL

Zip Code

32825

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

Victor Alvarez

Date **3/2/02**

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
Pres/D	VICTOR ALVAREZ	955 SONATA LANE	ORLANDO, FL 32825
Sec/D	RACHEL ALVAREZ	955 SONATA LANE	ORLANDO, FL 32825
T/M	MARGARITA ALVAREZ	955 SONATA LANE	ORLANDO, FL 32825

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:

Victor Alvarez - VICTOR ALVAREZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/02/02
(407) 254-4994
(321) 356-6987
Daytime Phone #