

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 # P97000108749

1. Corporation Name

HAE REAL ESTATE CORPORATION

Principal Place of Business

7250 SW 141ST TERR.  
MIAMI FL 33158

Mailing Address

7250 SW 141ST TERR.  
MIAMI FL 33158

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.  
605 SW 7th Ave

City & State  
Ft. Lauderdale, FL

Zip  
33315

Country  
USA

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.  
605 SW 7th Ave.

City & State  
Ft. Lauderdale, FL

Zip  
33315

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida

12/30/1997

5. FEI Number

650820426

Applied For

Not Applicable

6. 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	STILWELL, ERIKA H	7250 SW 141ST TERR.	MIAMI FL 33158

300002737353-6  
-01/12/99-01005-006  
\*\*\*\*750.00 \*\*\*\*750.00

8. Name and Address of Current Registered Agent

STILWELL, ERIKA H  
7250 SW 141ST TERR.  
MIAMI FL 33158

9. Name and Address of New Registered Agent

Name

STILWELL ERIKA H.

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

605 SW 7th Avenue

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State

FL

Zip Code

33315

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

*[Signature]*

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 12/15/98

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]*

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/15/98

Date

305-778-9919

Daytime Phone #

CR2E040 (8/98)