

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 APR -8 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900015470009
04/08/03--01047--019 **300.00

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000008860

1. Corporation Name

LAWMASTERS INVESTMENTS, INC.

2. Principal Office Address

330 S.W. 27th AVE

Suite, Apt. #, etc.

Suite 502

City & State

Miami, Florida

Zip

33135

Country

U.S.A.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1/28/98

5. FEI Number

650066988

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

Maria A. Guitian, Esq.

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

330 S.W. 27th Ave

Suite, Apt. #, Etc.

Suite 502

City

Miami

State

FL

Zip Code

33135

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

Maria A. Guitian, Esq.
REGISTERED AGENT MUST SIGN

Date 4-3-03

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
P.V.T	Maria A. Guitian	2642 Collins Ave #410	Miami, FL 33140
S	Maria Guitian	330 S.W. 27 th Ave #502	Miami, FL 33135

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:

Maria A. Guitian

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/03

Date

305-644-9111

Daytime Phone #

CR2E081 (10/02)

g 4/9

Maria Antonia Guitian

2642 Collins Avenue
Unit 410
Miami Beach, Florida 33140
305-535-1727

April 3, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314
Attn: Reinstatement Department.

RE: Lawmasters Investments , Inc

Dear Sir/Madam:

Please be advised that I did not receive the form for the annual report for last year and the corporation has been dissolved. The reason I found out it was not paid was because I was completing my tax form and I noticed there was no check for this item. Had I received the notice to pay I would have sent the money. Please find enclosed my check for \$300.00 which I was told to send by your employee when I called for this year and last year.

Should you need to talk to me please call me.

Sincerely,


Maria A. Guitian

MAG/wp