

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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

DOCUMENT # P98000012721

1. Corporation Name

FORTUNE GROUP ENTERPRISES, INC.

FILED

04 MAY 26 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Office Address

633 NE 167th Street

3. Mailing Office Address

633 NE 167th Street

Suite, Apt. #, etc.

Suite 1109

Suite, Apt. #, etc.

Suite 1109

City & State

North Miami Beach, FL.

City & State

North Miami Beach, FL.

Zip

33167

Country

Zip

33167

Country

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida

February 9, 199

5. FEI Number

650811821

* Applied For

Not Applied

6. CERTIFICATE OF STATUS DESIRED ☐58.75 Additional Fee req.
for a Certificate of Stat

7. Name and Address of Current Registered Agent

Name

George Howard II

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

1150 Wilshire Cir. West

Suite, Apt. #, Etc.

City

Pembroke Pines

State
FLZip Code
33027

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

 REGISTERED AGENT MUST SIGN

Date 5-26-2004

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO	George W. Howard II	1150 Wilshire Cir. West	Pembroke Pines, FL 33027
P	George Martinez	600 N.E. 36th, Suite 609	Miami, FL 33137

10. I certify that I am an officer or director of 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)(b), 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:

5-26-2004

(305) 654-1830

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
Fax Number : (305) 373-7718

CORPORATION REINSTATEMENT

FORTUNE GROUP ENTERPRISES, INC.

Certificate of Status	0
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