

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 APR 29 AM 7:29

DOCUMENT #

1. Corporation Name

New Venture Realty

P98000046373

2. Principal Office Address

201 Bridle Path

Suite, Apt. #, etc.

City & State

Longwood FL

Zip

32779

Country

USA

3. Mailing Office Address

201 Bridle Path

Suite, Apt. #, etc.

City & State

Longwood FL

Zip

32779

Country

USA

REINSTATEMENT 01-04

4. Date Incorporated or Qualified
To Do Business in Florida

5/22/1998

5. FEI Number

59-3512789

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

NORMAN H. RUBENSTEIN

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

201 Bridle Path

Suite, Apt. #, Etc.

City

Longwood

State
FL

Zip Code

32779

600034763536
04/29/04--01067--032 **\$60.00

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

Norman H. Rubenstein

REGISTERED AGENT MUST SIGN

Date

4-25-04

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
D	NORMAN H RUBENSTEIN	201 Bridle Path	Longwood FL 32779

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:

Norman H. Rubenstein

NORMAN RUBENSTEIN

4-25-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (01/04)

New Venture Realty
201 Bridle Path
Longwood, FL 32779

April 26, 2004

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

To whom it may concern,

I am requesting that you waive the \$600.00 reinstatement fee. I did not receive the notification of monies due or any notice of cancellation. Please find the remaining fees for reinstatement. Thank you in advance for the assistance.

Norman Rubenstein

A handwritten signature in black ink, appearing to read 'Norman Rubenstein', written in a cursive style.