

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUN 22 AM 11:44

DOCUMENT #

P98000051653

1. Corporation Name

4190 N. W. 32nd Ave. PROPERTIES
TRUST, INC.

W01-11618

Principal Place of Business

Mailing Address

725 N. W. 14 Ave.

Ft. Lauderdale, Fl. 33304

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
1040 N. E. 15 Ave.

3. New Mailing Office Address, If Applicable
1040 N. E. 15 Ave.

4. Date Incorporated or Qualified
To Do Business in Florida

6/10/98

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

xx

Applied For

Not Applicable

City & State

City & State

Ft. Lauderdale, Fl.

Ft. Lauderdale, Fl.

Zip

Country

Zip

Country

33304

USA

33304

USA

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
P/D	SCOTTY RAGSDALE	1040 N. E. 15 Ave.	Ft. Lauderdale, Fl. 33304

100004451661--4

-06/29/01--01050--003

***1050.00 ***1050.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Jeanette Molina
725 N. W. 14 Terr.
Ft. Lauderdale, Fl. 33304

Name
Scotty Ragdale

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

1040 N. E. 15 Ave. 1040 N. E. 15th Ave

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State
FL

Zip Code
33304

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

Scotty Ragdale

REGISTERED AGENT MUST SIGN

Date

5-28-01

11. This corporation owes 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:

Scotty Ragdale

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-18-01 954-761-9281

CR2E081 (12/98)