

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

02 MAR 18 PM 1:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000052369**

1. Corporation Name

GARDENS COMMERCIAL INVESTMENTS, INC.

Principal Place of Business

Mailing Address

1399 S.W. 1ST AVENUE THIRD FLOOR
MELLON UNITED NATIONAL BANK BUILDING
MIAMI FL 33130

1399 S.W. 1ST AVENUE THIRD FLOOR
MELLON UNITED NATIONAL BANK BUILDING
MIAMI FL 33130

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

06/11/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0919554

Not Applicable

Zip

Country

Zip

Country

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	FRAYND, PAUL	560 N.W. 165TH STREET ROAD, SUIT	MIAMI FL 33169
VPSD	FRAYND, SAUL	560 N.W. 165TH STREET ROAD, SUIT	MIAMI FL 33169

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

COHEN, LEWIS R
1399 S.W. 1ST AVENUE THIRD FLOOR
MELLON UNITED NATIONAL BANK BUILDING
MIAMI FL 33130

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Paul Fraynd
REGISTERED AGENT MUST SIGN

Date

3/15/02

11. 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:

Paul Fraynd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/02

Date

Daytime Phone #

CR2ED40 (8/01)

zelz

LEWIS R. COHEN, P.A.
Attorneys At Law
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Miami, Florida 33130

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Carla A. Jones, Esq.

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March 15, 2002

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: Gardens Commercial Investment, Inc.

Enclosed please find the Application for Reinstatement with regards to the above mentioned corporation along with a check #1445 in the amount of \$758.75. Please file as a rush basis.

If you have any questions or comments concerning the enclose, please do not hesitate to contact me.

Very truly yours,

LEWIS R. COHEN, P.A.



Maria C. Montes, Legal Assistant
to Lewis R. Cohen, Esq.

LRC/mcm
Enclosures