

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 APR 20 AM 9:30

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-04/26/01--01032--015
***150.00 ***150.00



DOCUMENT # P98000087196

1. Corporation Name

VIRGIN INTERNATIONAL PROPERTIES, INC.

Principal Place of Business

Mailing Address

2999 N.E. 191ST STREET #900
AVENTURA FL 33180

2999 N.E. 191ST STREET #900
AVENTURA FL 33180

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

10/09/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-1070502

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSTD	HOLNBURGER, ANTON	7000 ISLAND BLVD #1806	AVENTURA FL 33180

05-10-00 90176 045 \$150.00

Handwritten signature

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SCHIFFMAN, ADAM R
2999 N.E. 191ST STREET #900
AVENTURA FL 33180

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

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/01
Date

(305) 602-1528
Daytime Phone #

CR200-00 (800)

**VIRGIN INTERNATIONAL PROPERTIES, INC.
7000 ISLAND BOULEVARD, #1806
AVENTURA, FLORIDA 33160**

April 17, 2001

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

Attention: Sean Toner
Senior Section Administrator

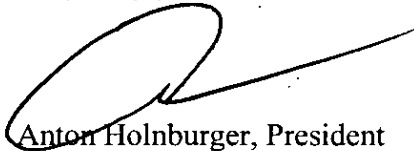
Re: Virgin International Properties, Inc.
Ref. Number: P98000087196

Dear Mr. Toner:

Pursuant to your letter of April 11, please be advised that corporation did not receive any correspondence from your office requesting corrections to the 2000 Uniform Business Report.

Thank you for your assistance in this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Anton Holnburger', with a long horizontal stroke extending to the right.

Anton Holnburger, President
Virgin International Properties, Inc.