

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

00 DEC 14 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000029737

1. Corporation Name

PREMIER CORPORATE PLAZA, INC.

Principal Place of Business

c/o Keith Mack LLP
200 S. Biscayne Blvd. 20th
Miami, Florida 33131

Mailing Address

c/o Keith Mack LLP
200 S. Biscayne Blvd., 20th
Miami, Florida 33131

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

2. New Principal Office Address, If Applicable

7875 S.W. 104th Street

3. New Mailing Office Address, If Applicable

7875 S.W. 104th Street

Suite, Apt. #, etc.

Suite 101

Suite, Apt. #, etc.

Suite 101

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33156

Country

US

Zip

33156

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

March 31, 1999

5. FEI Number

65-0910494

Applied For

Not Applicable

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	Patricia Delinois	7875 S.W. 104th Street, #101	Miami, Florida 33156
			300003524023--0 -01/04/01--01104--007 ****758.75 ****758.75

REINSTATEMENT

2000
M/M

8. Name and Address of Current Registered Agent

Richard A. Wood, Esq.
Fowler White Burnett Hurley
Banick & Strickroot, P.A.
100 S.E. 2nd Street
17th Floor
Miami, Florida 33131

9. Name and Address of New Registered Agent

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

Date

12/12/00

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/13/00

Daytime Phone #