

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 31 PM 3:38

DOCUMENT #

Pa9000 031344

1. Corporation Name

Pine Hill Properties, Inc.

2. Principal Office Address

734 Buck Hendry Way

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite A

Suite, Apt. #, etc.

City & State

Stuart, FL

City & State

Zip

34994

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

April 6, 1999

5. FEI Number

11-234-4020

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Testa, Leonard J.

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

734 Buck Hendry Way

Suite, Apt. #, Etc.

Suite A

City

Stuart

State

FL

Zip Code

34994

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

Leonard J. Testa

Date 10/24/01

REGISTERED AGENT MUST SIGN

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
Pres.	Leo S. Testa	25 Pine Hill Drive	Dix Hills, N.Y. 11746
Sec.			
Tres.			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/26/2001

Daytime Phone #

CR2081 (9/00)

PINE HILL PROPERTIES, LTD.



RESIDENTIAL, COMMERCIAL & BUSINESS BROKERS

October 25, 2001

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

To whom it may concern,

I am requesting reinstatement of corporation. I did not receive any notices at the old address. I am also changing address and registered agent on new application.

Enclosed find check for One hundred fifty eight dollars and seventy five cents.

Filing fee	150.00
Certificate of status	8.75
	<u>158.75</u>

Any questions or problems please contact: Mr. Leo S. Testa
President
Pine Hill Prop. Inc.
1-800-244-5499

Sincerely,

Lee S. Testa
President

LST:fbn
Enc.