

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED

01 OCT 12 AM 8:58

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P99000040282

1. Corporation Name

FLORIDIAN REALTY VENTURES, INC.

2. Principal Office Address

4400 PINELWOOD RD

MELBOURNE FL 32934

Suite, Apt. #, etc.

4400 Pinewood rd

City & State

MELBOURNE FL

Zip

32934

Country

Brevard

3. Mailing Office Address

4400 PINELWOOD RD

MELBOURNE FL 32934

Suite, Apt. #, etc.

4400 Pinewood rd

City & State

MELBOURNE FL

Zip

32934

Country

Brevard

4. Date Incorporated or Qualified  
To Do Business in Florida

June 99

5. FEI Number

59-3587522

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

00-01

7. Name and Address of Current Registered Agent

Name

John Soiteau in care of  
Watson Victor M & Atty.

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

1970 Michigan Ave

Suite, Apt. #, Etc.

Burdling C

City

COLOA

10000467091

11/07/01-01055-003

\*\*\*900.00 \*\*\*900.00

State

FL

Zip Code

32922

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

JOHN L. SOITEAU REGISTERED AGENT MUST SIGN

Date

9/25/07

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
<u>PHYSN</u> <u>D</u>	<u>Charles JULIAN</u>	<u>4400 PINELWOOD RD</u> <u>MELBOURNE FL 32934</u>	<u>Melboore FL</u> <u>32934</u>

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)(l), 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:

Charles Julian Pres  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Sept 22 2007

Daytime Phone #

321  
254-0531

CR02001 (8/06)