

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 MAR 26 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000071546

1. Corporation Name

SANDRUBY PROPERTIES INC.

2. Principal Office Address

14253 S.W. 146 AVENUE

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

Zip

33186

Country

USA

3. Mailing Office Address

14253 S.W. 146 AVENUE

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

Zip

33186

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

08/05/99

5. FEI Number

☒ 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

SANDRA J. RUBIO

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

14253 S.W. 146 AVENUE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33186

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

03/18/03

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
PD	SANDRA J. RUBIO	14253 S.W. 146 AVENUE	MIAMI, FL. 33186

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

03/18/03

Date

786-242-3121

Daytime Phone #

CR2E081 (10/02)

3/31

MARTA M. FUERTES, CPA

13264 S.W. 108 St. Circle

Miami, Fl. 33186

Office (305) 385-0737 Fax (305) 385-4077

March 17, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Re: SANDRUBY PROPERTIES INC.
DOCUMENT #P99000071546

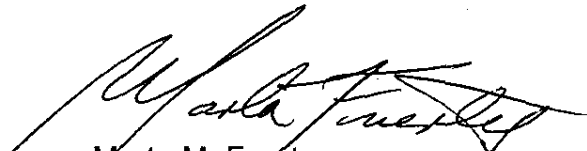
To Whom It May Concern:

This letter is to request a one-time abatement of late filing of the uniform business report. While doing the bookkeeping I realized that the 2000, 2001, 2002, and 2003 report had not been filed. The owner mentioned he never received the original bill and therefore he did not send it. Apparently the original notice was never forwarded when they moved.

The new address is 14253 s.w. 146 avenue, Miami, Fl. 33186

I am enclosing a reinstatement form and a check for \$600.00 and request a one-time abatement of late filing penalties. Thanking you in advance I remain.

Sincerely,

A handwritten signature in black ink, appearing to read 'Marta M. Fuertes', with a stylized flourish at the end.

Marta M. Fuertes
Certified Public Accountant