

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 96 NOV 14 PM 12:16 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # 513698 1. Corporation Name PROPERTIES BY TANVA, INC.		REINSTATEMENT <u>91-916</u>			
Principal Place of Business 405 SE 7 AVENUE DEERFIELD BEACH, FL 33441					
Mailing Address (SAME) 405 SE 7 AVENUE DEERFIELD BEACH, FL 33441		1096-23738 DO NOT WRITE IN THIS SPACE NOVEMBER 16, 1990 5. FEI Number 605-0230263 6. CERTIFICATE OF STATUS DESIRED ☐			
* If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip		3. New Mailing Address, If Applicable Suite, Apt. #, etc. City & State Zip		4. Date Incorporated or Qualified To Do Business in Florida NOVEMBER 16, 1990 Applied For Not Applicable	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1	2	3	4		
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
Pres. Director	DONALD A. FRATELLO	405 SE 7 AVENUE DEERFIELD BEACH, FL 33441	DEERFIELD BEACH, FL 33441		
8. Name and Address of Current Registered Agent THEODORE K. EDNER 3067 EAST COMMERCIAL FORT LAUDERDALE, FL 33308			9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S. Signature of Registered Agent <u><i>Donald A. Frattello</i></u> REGISTERED AGENT MUST SIGN			Date 11/12/96		
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: <u><i>Donald A. Frattello</i></u> DONALD A. FRATELLO 10-28-96 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 11/12/96 Daytime Phone # (954) 426-0897					