

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S44425

1. Corporation Name

NATIONAL RESOURCES OF AMERICA, INC.

2. Principal Office Address - No P.O. Box #

17690 S. DIXIE HWY

3. Mailing Office Address

17690 S. DIXIE HWY

Suite, Apt. #, etc.

SUITE B

Suite, Apt. #, etc.

SUITE B

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33157

Country

USA

Zip

33157

Country

USA

7. Name and Address of Current Registered Agent

TEOFILO GERMOSEN

21427 GLENDALE AVENUE

Suite, Apt. #, Etc.

PT CHARLOTTE

State
FL

Zip Code
33952

REINSTATEMENT 93-07

4. Date Incorporated or Qualified
To Do Business in Florida

4/9/1991

5. FEI Number

650286448

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Teofil Gerмосen

Date 10/17/2007

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
P. VP. T. S.	TEOFILO GERMOSEN	21427 GLENDALE AVE.	MIAMI, FL 33952
			400111491154 10/30/07--01025--002 **2250.00
			400111491154 10/30/07--01025--003 **245.00

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 contained in Chapter 119, 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:

Teofil Gerмосen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/17/2007

Date

305-971-4690

Daytime Phone #

5282

NATIONAL RESOURCES OF AMERICA, INC.

17690 SOUTH DIXIE HWY
SUITE B
MIAMI, FL 33157

MIAMI, OCTOBER 17, 2007
FEIN: 65 028 448
DOCUMENT #: S44425

**FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA**

Gentlemen,

This letter is to inform you that in the last fourteen years we did not receive any correspondence in reference to the annual reports for National Resources of America, Inc. Enclosed please find corporation reinstatement form and corresponding payments, in the amount of \$2,250, for each of the past years for which we did not file annual reports.

If you have any questions do not hesitate to contact us.

Sincerely,



NATIONAL RESOURCES OF AMERICA, INC.
Teofilo Germosen

Enc.