

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONSSECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # 593356

1. Corporation Name

306 Landmark Inc.

Principal Place of Business

Mailing Address

20185 No. Country Club Drive
Apt. 3062 So. Biscayne Blvd.
30th floor
Miami, FL 33131
Attn. T. Canaleo

N. Miami Beach, FL 33180

If above addresses are incorrect in any way, write through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date incorporated or Qualified
To Do Business in Florida

11/12/1991

5. FEI Number

65-0346672

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
DV	ESTELLA HODARA	20185 E. Country Club Dr.	N. Miami Beach, FL
ST	ESTELLA HODARA	20185 E. Country Club Dr.	N. Miami Beach, FL
DP	NELSON HODARA	20185 E. Country Club Dr.	N. Miami Beach, FL
D	HELIO HODARA	20185 E. Country Club Dr.	N. Miami Beach, FL

8. Name and Address of Current Registered Agent

David Feldman
407 Lincoln Rd. PH NE
Miami Beach, FL 33139

9. Name and Address of New Registered Agent

Name
ESTELLA HODARA
Street Address (P.O. Box Number is Not Acceptable)
20185 E. Country Club Dr..
Suite, Apt. #, Etc.
Apt. #306
City
N. Miami Beach
State
FL
Zip Code
33180

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 807.0505, F.S.

Signature of
Registered Agent

Estella Hodara

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.Yes ☐ No ☒(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 817, 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 807.0401 or 817.0401, 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)(f), 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:

Estella Hodara

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ESTELLA HODARA

12-24-99 305-539-4766

Date

Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 922-4004

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

CORPORATION REINSTATEMENT

306 LANDMARK, INC.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$1,208.75