

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION



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

FILED

01 APR -2 AM 11: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S96537

1. Corporation Name

BOCA PALM REALTY, INC

2. Principal Office Address

6971 N. Federal Hwy.

Suite, Apt. #, etc.

SUITE #103

City & State

BOCA RATON, FL

Zip

33487

Country

USA

3. Mailing Office Address

6971 N. Federal Hwy.

Suite, Apt. #, etc.

SUITE #103

City & State

BOCA RATON, FL

Zip

33487

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/26/91

5. FEI Number

65-032-9736

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

PATRICIA A. RATHGEB

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

6971 N. Federal Hwy #103

Suite, Apt. #, Etc.

SUITE #103

City

BOCA RATON

State
FL

Zip Code

33487

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

Patricia Rathgeb

REGISTERED AGENT MUST SIGN

Date 3/20/01

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
Pres.	PATRICIA A. RATHGEB	6971 N. Federal Hwy #103	BOCA RATON, FL 33487
			600003992776--3 -04/11/01--01107--006 ****300.00 ****300.00
		DU-01 4BR	78

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

Patricia Rathgeb

3/20/01 561-988-8900

Date

Daytime Phone #

CR2E081 (9/00)

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TO: DIVISION OF CORPORATION

From:

BOCA PALM REALTY, INC.
6971 N. FEDERAL HIGHWAY
STE. 103
BOCA RATON, FL 33487

RE: S96537

Request taken by: lsellers
03-19-2001

To Whom It May Concern:

The forms you recently requested from this office are:

(1) 203. Reinstatement (Corp)

* REASON FOR REINSTATEMENT at \$300 Fee:
DEPARTMENT FAILED TO CHANGE MY CORPORATE
ADDRESS AS REQUESTED IN ARTICLE (3), ON NAME
CHANGE.

Should you have any questions or need any further information,
please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

Thank you,

Pat G. Rathgeb, President