

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 29 AM 10:23

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **V18848**

1. Corporation Name

MINTO REALTY, INC.

Principal Place of Business

Mailing Address

120 E. OAKLAND PK BLVD
SUITE 105
FT LAUDERDALE FL 33334
US

P.O. BOX 26502
TAMARAC FL 33320
US

If above addresses are incorrect in any way, line 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

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

03/04/1992

5. FEI Number

65-0316718

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	MINTO, GREGORY	9330 LIME BAY BLVD #115	TAMARAC FL 33321
VD	MINTO, EDGAR	309 GENEVIEVE AVENUE	PACIFICA CA 94044

500025810515

12/29/03--01038--018 **750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MINTO, GREGORY
9330 LIME BAY BOULEVARD
#115
TAMARAC FL 33321

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Gregory J. Minto
REGISTERED AGENT MUST SIGN

Date **Dec 26 2003**

11. 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:

Gregory J. Minto
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEC 26 2003 954-3280980

Date

Daytime Phone #

CR2E040 (7/03)