

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 SANDRA MORRIS
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

FILED
 98 MAR 16 PM 12:50
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 708469
 1. Corporation Name: VILLA DEL MAR, INC.

Principal Place of Business: 2500 South Ocean Boulevard
 Boca Raton, Florida 33432
 Mailing Address: 2500 South Ocean Boulevard
 Boca Raton, Florida 33432

700002460407--9
 -03/18/98--01001--027
 *****8.75 *****8.75
 700002460407--9
 -03/18/98--01001--026
 *****446.25 *****411.25

2. New Principal Office Address: N/A
 3. New Mailing Office Address: N/A
 Suite, Apt. #, etc. N/A
 City & State: REINSTATEMENT
 Zip: 95-98 Country: LFS

4. Date Incorporated or To Do Business in Florida: 2/11/75
 5. FEI Number: 59-1118643
 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)			
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
PD	Ed Boughton	2500 South Ocean Blvd.	Boca Raton, FL 33432
TD	Stanley Szambecki	2500 South Ocean Blvd.	Boca Raton, FL 33432
SD	Kern Wheaton	2500 South Ocean Blvd.	Boca Raton, FL 33432
VD	Joseph Kennedy	2500 South Ocean Blvd.	Boca Raton, FL 33432
D	Andy Zambelli	2500 South Ocean Blvd.	Boca Raton, FL 33432

8. Name and Address of Current Registered Agent
 Zambelli, Andrew
 2500 South Ocean Boulevard
 Boca Raton, FL 33432

9. Name and Address of New Registered Agent
 Name: Peter C. Mollengarden, Esq.
 c/o Becker + Poliakoff, P.A.
 Street Address (P.O. Box Number is Not Acceptable): 500 Australian Avenue South
 Suite, Apt. #, Etc.: 9th Floor
 City: West Palm Beach State: FL Zip Code: 33401

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.
 Signature of Registered Agent: Peter C. Mollengarden REGISTERED AGENT MUST SIGN Date: 3/13/98

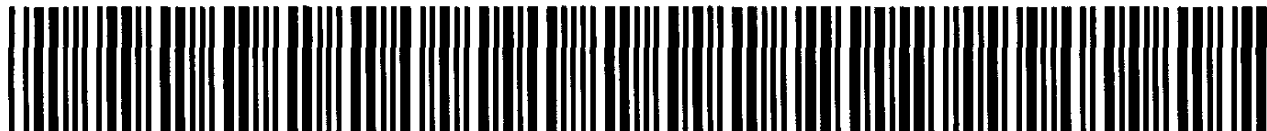
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

12. I 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: Kern Wheaton
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: Daytime Phone:

KERN WHEATON Secretary 2-12-98 561-395-6055

Tracking #: 700002460407



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