

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 29 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717229

1. Corporation Name

821 - 82ND STREET CONDOMINIUM, INC.

Principal Place of Business

825 NW 15TH STREET
HOMESTEAD FL 33030

Mailing Address

825 NW 15TH STREET
HOMESTEAD FL 33030

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/23/1969

5. FEI Number

NOT APPLICABLE

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	4 City / State / Zip
PD	MIRANDA, OSCAR	825 NW 15TH STREET	HOMESTEAD FL 33030
DV	APONTE, CARLOS	821 82ND STREET NO 3	MIAMI BEACH FL 33141
STD	GERSHMAN, CAROL	3 ISLAND AVE APT 12-L	MIAMI BEACH FL 33139

400008643774
10/29/02--01031--010 **61.25

OSCAR

8. Name and Address of Current Registered Agent

MIRANDA, OSCAR
825 NW 15TH STREET
HOMESTEAD FL 33030

9. Name and Address of New Registered Agent

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State FL	Zip Code

CR2E040 (8/02)

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 10/23/02

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:

OSCAR MIRANDA
OSCAR MIRANDA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/23/02 305-5461089

Date

Daytime Phone #

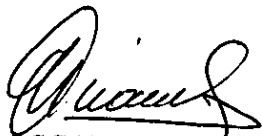
October 23, 2002

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
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The objective of the present is to let you know that I (OSCAR MIRANDA- PD OF 821 - 82ND STREET CONDOMINIUM, INC.) did not receive the prior business report notices. We had this problem in the past. Is possible that the notices went to 821 82nd street Miami Beach and this is the reason why we do not receive a lot of mail concerning the corporation. I apologize for the inconvenience and I hope this won't happen in the future.

At this moment I am sending the reinstatement application with the corresponding fees.

Thank You



OSCAR MIRANDA
PD 821-82ND STREET CONDOMINIUM, INC.