

PAGE 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED 05 NOV 16 AM 5:10 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # 729431

1. Corporation Name

ARMEN APARTMENT CONDOMINIUM Association, INC.

200060323TT2 10/07/05--01001--014 \*\*306.25

2. Principal Office Address

7770 TATUM WATERWAY DRIVE

3. Mailing Office Address

13315 NE 6 AVE/OFFICE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI BEACH, FL

City & State

NORTH MIAMI, FL

Zip

33141

Country

USA

Zip

33161

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

4/12/74

5. FEI Number

501577829

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

JEFFREY FEINBERG

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

4000 HOLLYWOOD BLVD

Suite, Apt. #, Etc.

#350-N

City

HOLLYWOOD

State

FL

Zip Code

33021

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

[Handwritten Signature]

REGISTERED AGENT MUST SIGN

Date

11/7/05

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
PRESIDENT	ALIEN CTELMINSKY	13315 NE 6th AVE #1	N. MIAMI, FL 33161
VICE PRESIDENT	JERRY DANGELO	7770 TATUM WATERWAY DR #3	M. B. FL 33141

10. I certify that I am an officer or director of 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

[Handwritten Signature]

Date

SEP 28 2005

Daytime Phone #

305 891-6666

PAGE 202

**ARMEN CONDO ASSOCIATION**

7772 TATUM WATERWAY DR

Miami Beach, FL 33141

Tel. (305) 899-2005

10/03/05

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

We are writing this letter to inform that we were just informed by our attorney that our association has not renewed its annual report since the year 2000.

We did not receive any renewal notices from you or perhaps it was mailed elsewhere. Therefore, we are informing you of our current mailing address

13315 NE 6 AVE/Office North Miami, FL 33161.

Enclosed are 2 checks. Check # 1160 is for 306.25 for the renewal fees for the years 2001 thru 2005.

Check # 1161 is for \$175.00 - re-instatement fee. However, we kindly request that you waive this fee and return this check to us because we did not pay as a result of not receiving the annual payment notices.

We hope that you accept our request and re-instate our corporation.

Thank you,

  
Allen Chelminsky

President

Armen Condo Association