APPLICATION FOR PLEASE READ ALL INSTRUCTIONS BEFORE OF STATE Sandra B. Mortham					1				
REINSTATEMENT D			Secretary of IVISION OF CORP		97 OCT 29 PM 4: 11				
DOCUMENT # 769455					SECRETARY OF STATE TALLAHASSEE, FLORIDA				
1. Corporation Name AIRPORT LAKE WAREHOUSE CONDOMINIUM ASSOCIATION, INC.						TALLAHASSEE	FLORIDA		
Principal Place of Business Mailing Ad 2030 NW 94TH AVENUE 2030 NW 94 MIAMI FL 33172 MIAMI FL 33			TH AVENUE						
If above addresses are incorrect in any way, line through incorrect in 2. New Principal Office Address, if Applicable 3. New Maile			information and enter correction below.		4. Date Incorp	orated or Qualified ness in Florida	07/00/404		
Suite, Apt. #, etc. Suite, Apt. #			, elc.		To Do Busii 5. FEI Numbe	PCI Musebas			
City & State City & S					59-2355136 Not Applicable				
Zip	Country	Zip	Coun	itry	6. CERTIFICATI	E OF STATUS DESIRED	\$8.75 Addition for a Cert	tional Fee required tificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)									
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box No		lumbers)	4	City / State / Zip			
PD	D NAVARINI, GEORGE O.			2030 NW 94TH AVENUE		MIAMI FL			
STD	CAUNEDO JR, AGUSTIN	2030 NW 94TH AVENUE			MIAMI, FŁ 00000				
VD	LEWIS, DONALD M	2030 NW 94TH AVENUE			MIAMI, FL 00000				
D KAYWORTH, PETER			2030 NW 94TH	AVENUE	MIAMI FL				
				REINSTATEMENT 1997					
			a: alan						
8. Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent				
CAUNEDO JR. AGUSTIN. 2030 NW 94TH AVENUE				Street Address (P	Street Address (P.O. Box Number 15 10/31/9701088001				
MIAMI FL 33172				Sulte, Apt. #, Etc.	 	****236,25 ****236.25			
				City		**************************************	State Zip C	ode	
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 fields 171.44 REGISTERED AGENT MUST SIGN Date 18/2.7/9.7									
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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 filting 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: PIGNATURE AND TYPES THE PROJECT ROLL OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #									