


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

04 JUL 26 AM 9:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P01000098688

1. Corporation Name  
MICHIGAN REAL ESTATE HOLDINGS, INC.

2. Principal Office Address 848 Brickell Key Drive		3. Mailing Office Address 9350 South Dixie Hwy	
Suite, Apt. #, etc. Apt. 1201		Suite, Apt. #, etc. Suite 1500	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33131	Country U.S.	Zip 33156	Country U.S.

09-10-04 01026 029 \$177.50

5-10-04 01026 028 \$722.50

4. Date Incorporated or Qualified To Do Business in Florida	10/10/2001
5. FEI Number 030421842	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name: Segredo, Frank J.

Street Address (P.O. Box Number is Not Acceptable): 9350 South Dixie Hwy

Suite, Apt. #, Etc.: Suite 1500

City: Miami

State: FL Zip Code: 33156

**REINSTATEMENT**

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: *[Signature]* REGISTERED AGENT MUST SIGN

Date: 7/21/04

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
D	CARBONE, SEBASTIANO	848 Brickell Key Drive, Apt. 1201	Miami, Florida 33131
D	DE CARBONE, MARIA S.	848 Brickell Key Drive, Apt. 1201	Miami, Florida 33131

10. 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: *Carbone Sebastiano Director* 1/15/04 (305) 448-7023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (10/02)