PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

94-98

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 MAY 15 AM 10: [illegible]

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01246

1. Corporation Name

SOUTH MIAMI BUSINESS CENTER
CONDOMINIUM ASSOCIATION SEC. 1, INC.

Principal Place of Business
4651 - 4699 SW 72 AVE.
AND
7175 SW 47 ST.
UNITS 201-210
MIAMI, FL 33155

Mailing Address
c/o MADDUX AND COMPANY
P.O. BOX 557113
MIAMI, FL 33255-7113

94 98

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

5. FEI Number 59-2503801
☐ 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
PRES.	LEONARD SUSSMAN -D	4699 SW 72 AVENUE	MIAMI, FL 33155
V.P.	HENRY AGUILERA -D	4661 SW 72 AVENUE	MIAMI, FL 33155
TREAS	RAY LARSON -D	4689 SW 72 AVENUE	MIAMI, FL 33155
SEC.	AARON HERTZ -D	7175 SW 47 ST. #210	MIAMI, FL 33155

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8. Name and Address of Current Registered Agent

J. SCOTT WESTON
c/o MADDUX AND COMPANY
4651-4699 SW 72 Ave
MIAMI, FL 33255-7113
33155

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City

5/15/98

000002530920--9
-05/21/98--01005--021
****481.25 FL ****481.25

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
REGISTERED AGENT MUST SIGN
Date 4/30/98

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 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: Raymond M. Larson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/98
Date

305 247-6301
Daytime Phone #

CR2E040 (1/98)