

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 MAY 16 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000012346

1. Corporation Name

Seventeen Davis Realty Corporation
111 East 61st Street
New York, NY 10021

2. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

111 East 61st Street

New York, NY

10021

REINSTATEMENT

0940

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

59-3492930

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

OMAR K. LIGHTFOOT, JR.

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

9385 N. 56th STREET

Suite, Apt. #, etc.

202

City

TEMPLE TERRACE, FL 33617

State

FL

Zip Code

33617

600003284286-0

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****908.75 ****908.75

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

Omar K. Lightfoot Jr.

REGISTERED AGENT MUST SIGN

Date

MAY 10, 2000

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
CEO	Bruce Slovian	111 E 61 st	New York, NY 10021
President	Jeffrey Slovian	111 E 61 st	New York, NY 10021

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

MAY 3, 2000 212 588-1260

Daytime Phone #