

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 MAR -8 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 745207

1. Corporation Name

Parker Tower Condominium Association, Inc.

200092355892
03/13/07--01018--012 **297.50

2. Principal Office Address

3140 South Ocean Drive

3. Mailing Office Address

3140 South Ocean Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hallandale, Florida

City & State

Hallandale, Florida

Zip

33009

Country

U.S.A.

Zip

33009

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

12/12/1978

5. FBI Number

591920067

☒ Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$6.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT

7. Name and Address of Current Registered Agent

Name

Michael L. Hyman, Esq.

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

Museum Tower - Twenty Seventh Floor, 150 West Flagler Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33130

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

Date

3/1/07

REGISTERED AGENT MUST SIGN

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
P	Myer Seidman	3140 South Ocean Drive, # 804	Hallandale, FL 33009
T	Murray Kitner	3140 South Ocean Drive, # 1204	Hallandale, FL 33009
VP	Morris Lewis	3140 South Ocean Drive, # 1212	Hallandale, FL 33009
S	Lesbia Panegre	3140 South Ocean Drive, # 1007	Hallandale, FL 33009
D	Fernando Prado	3140 South Ocean Drive, # 704	Hallandale, FL 33009
O	Selma Baron	3140 South Ocean Drive, # 404	Hallandale, FL 33009
D	Anthony Viacullo	3140 South Ocean Drive, # 2104	Hallandale, FL 33009

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

2/26/07

Daytime Phone #