

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 DEC 10 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 570402

1. Corporation Name

STARBOARD DEVELOPMENTS OF FLORIDA, INC.

2. Principal Office Address

2450 NE Mia. Gardens Dr.

3. Mailing Office Address

2450 NE Mia. Gardens Drive

Suite, Apt. #, etc.

Second Floor

Suite, Apt. #, etc.

Second Floor

City & State

No. Miami Beach, FL

City & State

No. Miami Beach, FL

Zip

33180

Country

USA

Zip

33180

Country

USA

REINSTATEMENT

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

4/17/78

5. FEI Number

59-1882195

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

Louis A. Supraski

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

2450 NE Miami Gardens Drive

Suite, Apt. #, etc.

Second Floor

City

No. Miami Beach

State

FL

Zip Code

33180

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

REGISTERED AGENT MUST SIGN

Date

12.7.1

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
PD	Allan Brown	2800 Island Blvd. #2505	Aventura, FL 33160
V/P/D	Gerald Ross	250 Yonge Street, #2400	Toronto, CANADA M5B 2M6

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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)(l), 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

Allan Brown, President

Date

Dec 6/01

Daytime Phone #



202

ACCOUNT NO. : 072100000032

REFERENCE : 296629 85437A

AUTHORIZATION : *Patricia Pizot*

COST LIMIT : \$ 2,537.50

ORDER DATE : December 10, 2001

ORDER TIME : 2:38 PM

ORDER NO. : 296629-005

CUSTOMER NO: 85437A

CUSTOMER: Sandi D. Morejon, Legal Asst
Smith & Supraski, P.a.
Second Floor
2450 N.e. Miami Gardens Drive
Miami, FL 33180

DOMESTIC FILINGS

RECEIVED
01 DEC 10 PM 3:54
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NAME: STARBOARD DEVELOPMENTS OF
FLORIDA, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward, Ext. 1135
EXAMINER'S INITIALS _____

*Our client has a closing tomorrow,
would appreciate any assistance to have
files as soon as possible.*

Thanks.