

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine [redacted]
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC 23 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 707689

1. Corporation Name
Skylake Gardens #1 Condominiums
Association Inc. or
Skylake Gardens No I Inc a Condominiums

2. Principal Office Address 1639 NE Miami Gardens Drive Suite, Apt. #, etc. #116		3. Mailing Office Address	
City & State Miami		City & State Florida	
Zip 33179	Country USA	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 8/11 1964

5. FEI Number 59-1060232 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 BRIAN J. GILLER
Street Address (P.O. Box Number is Not Acceptable) 975 ARTHUR GODFREY RD.
Suite, Apt. #, Etc. P.H.I.
City MIAMI BEACH State FL Zip Code 33179

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] Date 11/4/02
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
President	Eduardo Acosta	1639 NE Miami Gardens Drive #116	Miami FL 33179
Treasurer	Ligia Pinto	1635 NE Miami Gardens Drive #137	Miami FL 33179
Secretary	Cecilia Flores	1639 NE Miami Gardens Dr #208	Miami FL 33179
Vice President	Clara Lindsey	1601 NE Miami Gardens Dr #210	Miami FL 33179
Dir	Margaux Luiz	1601 NE Miami Gardens Dr 203	Miami FL 33179

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] 11/25/02 Date Daytime Phone #

CR2E081 (9/01)

*Incorporated
since 1988*



**Miami
Management, Inc.**
Full Service Property Management & Maintenance

Main Office:
14275 S.W. 142 Avenue
Miami, Florida 33186
Tel (305) 378-0130
Fax (305) 378-0259
Estoppel Dept. Fax (305) 253-4126
Toll Free: 1-800-273-4603

Reply to: _____

November 25, 2002

Division Of Corporations
Department of State
Division of Corporations P.O. Box 6327
Tallahassee, Florida 32314

From: Skylake Gardens # 1 Condominium Association, Inc.


To whom it may concern,

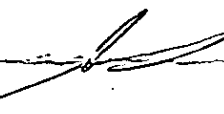
Please be aware that you have on file our filing fee in the amount of \$61.25 but somehow the corporation report was never received by you.

I also understand that a rejection letter was mailed to us on November 18, 2002 and we never received it. Please reinstate our corporation as soon as possible. Attached is the Uniform Business Report that was requested.

Should you have any question please contact me directly at 305 298-6602

Thank you,


Marta Bascoy CAM
Property Manager


Eduardo Acosta
President

North Miami Office:
1380 N.E. Miami Gardens Dr.
Suite 130
North Miami, Florida 33179
Tel (305) 956-5016
Fax (305) 956-2715

Broward Office:
1145 Sawgrass Corporate Parkway
Sunrise, Florida 33323
Tel (954) 846-7545
Fax (954) 846-8559
1-800-605-9160 Miami-Dade Tel.

Divisions:
MMI of the Palm Beaches, Inc.
1860 Old Okeechobee Road
Suite 510
West Palm Beach, Florida 33409
Tel (561) 686-7818

MMI of the Gulf Coast, Inc.
6225 Presidential Court
Suite C
Fort Myers, Florida 33919
Tel (239) 481-5250