PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION	FLORIDA DEPARTMENT OF STATE	12000 1400 m2
REINSTATEMENT	Secretary of State DIVISION OF CORPORATIONS	SECTION OF STATE TALL AM SSEEL FLOGIDA
DOCUMENT # 72693	32	IALLARY SEEL, HI CHIDA
1. Corporation Name North Gardens Cordominium of Derifield Beach, Inc.		500010134035 01/15/0301068017 **122.50
2. Principal Office Address TOUSE LA AUR Suite, Apt. #, etc.	3. Mailing Office Address Tour SE & Rue	01/15/030106s017 **[22.50
City & State	Suite, Apt. #, etc. City & State	4. Date Incorporated or Qualified To Do Business in Florida
Deenfield Brach, F1 Zip Country 33441 USA.	Decircle Brack Fl Zip Country	5. FEI Number Applied For Not Applied For Not Applicable
53 141 D3FE	7. Name and Address of Current Registere	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
Street Address (P.O. Box Number is Not Acceptable) Suite Apr. H, Etc. ## 302 State Zip Code		
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 Management 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 Margo Venic REGISTERED AGENT MUST SIGN Signature of Registered Agent Date 1/07/03		
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
Pros margo Verie	-700 SE 6 Ax	DeSield Bh. F133441
Sec VICKY MAY	700 SE 6 Aux	DeeSelf Bch Fl 33441
Trees Haran Sacdy	700 SE 6 Aux	Deedick Bah F13344
DIF JAMY AIBANT	700SE 6 Ave	Decheld Bh, F133441
Ir. LARRY JONES	700 SE 6 Ave	DeSield Bah, Fl 33441
O. 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 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: MANGO VENI 1/07/03 954-426-0695 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		

A 1/14

NORTH GARDENS OF DEERFJELD BEACH, INC.

700 Southeast Sixth Avenue Deerfield Beach, Florida 33441

January 7, 2003

Florida Department of State, Division of Corporations

Re: Reinstatement

Document reference # 726932

To Whom It May Concern:

Please be advised that the Association of North Gardens of Deerfield Beach, Inc. did not receive a renewal form for the Florida Department of State in the year 2002. According to the mailing address, our form was sent to the previous management company (Integrity Property Management). We are now self managed and all future correspondence should be sent to the association's principal address.

I have completed the Reinstatement form and enclosed a check in the amount of \$122.50. The fee represents the reinstatement fee for 2002 and the renewal fee for 2003 (as I was instructed).

Thank you for your assistance in the above matter.

Sincerely,

Aaron Saady

Treasurer on Behalf of

The Association

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