PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
06 SEP 20 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 743869

1. Corporation Name

Meridian Towers Condominium Association, Inc

REINSTATEMENT

2. Principal Office Address	3. Mailing Office Address
1605 Meridian Ave	309 23rd Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	#300
City & State	City & State
Miami Beach	Miami Beach
Zip: FL / Country: 33139	Zip: FL / Country: 33139

4. Date Incorporated or Qualified To Do Business in Florida: 08/09/1978

5. FEI Number: 650122186 ☐ 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: Regatta Real Estate Management, Inc

Street Address (P.O. Box Number is Not Acceptable): 309 23rd Street

Suite, Apt. #, Etc.: #300

City: Miami Beach | State: FL | Zip Code: 33139

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 _____

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	Carlos Martinez	1605 Meridian Ave	Miami Beach, FL 33139
VP	Alan Asper	1605 Meridian Ave	Miami Beach, FL 33139
T	Rodolfo Elias	1605 Meridian Ave	Miami Beach, FL 33139
S	Armand LeBeau	1605 Meridian Ave	Miami Beach, FL 33139

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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 contained in Chapter 119, 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: Armand LeBeau Secretary 9/15/2006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

K. Eckel SEP 21 2006