<i>j</i> <i>i</i>	PLEASE B	EAD ALL I	NSTRUCTI	ONS B	EEODE (OMPLET	ING THIS F	OBM			
AP	RIDA DEPAF Sandra E Secretai	TRUCTIONS BEFORE OF A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State			FILED	O					
REINSTATEMENT DOCUMENT # 764957						93 MR 15 PH 3: 39					
1. Corporation Name 764957						CECLETY BY LE STATE LILE MINESSEE, FLORIDA					
CEDAR BREEZE CONDOMINIUM ASSOCIATION, INC.							THE PARTY SAIL FLORIDA				
Principal P	lace of Business	Mailing	Address	- 8 240							
c/o 3 Coral	156 Coral Spri Springs, FL	ngs Driv 33065-38	e 02		RE	NS	NEN	T			
If above addresses are incorrect in any way, line through incorrect information and enter correction. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address 3. New Mailing Office Address 4.						4. Date Incor	porated or Qualified		92	-99 av)	
Suite, Apt.	Apt. #, elc	, elc			To Do Business in Florida 9 / 10 / 1982 5. FEI Number Applied Fo						
City & State City & Sta			State			59-2428964 Not Applica			of Applicable		
Zip	Country	Zip		Country	:	<u>.L</u>	TE OF STATUS DESIRE			l Fee required te of Status	
7. Names : Title(s)	7. Names and Street Addresses of Each Officer and/or Director (Fig. Name of Officers and/or Directors 2			Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box N			4	City / State /	Zip		
P/D	Steven J. Sarko			Cora	l Sprin	gs Dr	Coral Sp	rings,	FL	33065	
YD	Susan White	3164	3164 Coral Springs Dr Coral Springs, FL 3						33065		
sirb	SIT/D Lotus Boss			Coral	l Sprin	gs Dr	Coral Spi	rings,	FL	33065	
								18 54 2 7/9901 865,00	1098-	==015	
	8. Name and Address of	Current Registers	d Agent	_ 7		9. Name and	Address of New Reg	gistered Agen			
					Name Lotus Boss						
					Street Address (P.O. Box Number is Not Acceptable) 3156 Coral Springs Drive Suite, Apl #. Etc						
		ļ ē	Coral Springs State Zn Code FL 33065								
10. I, being Signature o Registered		a Bo	Corporation, am fa	miliar with a	and accept the c	obligations of Sec		31-99	7		
11 Th	is corporation owes angible Personal P	or has pai	d the currer due June 3	nt year 0.	Yes 🗀	l No [d]	/ (See	other side for on intangible		tion	
this rein owed by	that I am an officer or director or statement application, the reason y the corporation have been paid application is true and accurate, a	n for dissolution has and the names of	been eliminated, ti ndividuals tisted on	he corporati this form d	e name satisfies to not qualify for	the requirement an exemption ur	s of section 607.0401	or 617.0401, I	F.S., tha	talifees	
SIGNAT	TURE: LOTUS TO SIGNATURE AND TYPE		LE OF SIGNING OFFIC	GER OR DIRE	14 ECTOR	313	31-94 9 Date		YS7 Phone #	P35	