PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

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Charter# 769029

Suite, Apt. #, etc.

Southport Townhomes

Condominium, Inc.

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3. Mailing Office Address

2. Principal Office Address 315 Miami

O la alam

Suite, Apt. #, etc.

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Landerdale.

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Date Incorporated or Qualified 73/1983
To Do Business in Florida 6/23/1983

5. FEI Number (TAXID 5923 19976)

Applied For Not Applicable

CERTIFICATE OF STATUS DESIRED

	NOPT 1			-	
	7. Name al	nd Address of Current Registere	d Agent	440040	
	Name Nicolas Sardana	¥/38.	-07/	/20/0101111- :1050.00***1	-007 050.00
	Street Address (P.O. Box Number is Not Acceptable)	900.00-Adm	•	same track	
	Suite, Apt. #, Etc.	61.25-AR	1050 give		
	City Ft Lauderdale	8875-ARSUPP	State Zip C	S31 φ	<u>6</u>
8. I, being	appointed the registered agent of the above named corporation,	am familiar with and accept the ob	ligations of section 607.0505 or 61	7.0503, F.S.	0/6/1

Registered		ENT MUST SIGN	Date			
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			
Pres =	Nicotas Savdana	1315-Miami-Rd#E	- Ft-Lauderdale FL-33316			
50	Brad Ashlin D.	1315 Mami Rd#A	Ft LAnderbale FL 33316			
Sec.	Victoria Sutherland	1315 Mami Rd #C	Ft Lauderdalu FL 33316			

Tresid alex Lehman D. 1315 Miami Rd # D Ft-Laudendale FL 33316

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:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2000

Southport Townhome Condominium, Inc. Charter # 769029 1315 Miami Rd. Unit D Ft. Lauderdale, FL 33316

July 9, 2001

Ms. Kathy Ashton Department of State Division of Corporations PO Box 6327 Tallahassee. FL. 32314

Dear Kathy,

Per our conversation on July 6, 2001 this letter is to request the department of state to waive the \$175 reinstatement fee for Southport Townhome Condominium Inc. charter number 769029.

The department of state inadvertently dissolved our corporation in 1985, which we were unaware of until notification from our insurance company last month. The 1985 annual report and fee were filed correctly and verified by your office – see attached documents. Someone in your office returned a copy of our 1985 annual report stating to disregard any intent to dissolve – see highlighted areas on attached document. But our corporation was dissolved despite this correspondence.

Because we never received any further correspondence from your office we were unaware this had occurred. It appears now the department of state employee dealing with our condo (1315 Miami Rd. Ft. Lauderdale, FL. Charter # 769029) had us confused with the condo (1415 Miami Rd. Ft. Lauderdale, FL.)

Therefore I am requesting the \$175 reinstatement fee for Southport Townhome Condominium, Inc. Charter #769029 be waived. Enclosed is our reinstatement application and check for 1050.00. (\$61.25 x 17(yrs) = 1041.25 + 8.75 (1 certificate of status) = 1050.00

Should you have any other questions please feel free to contact me at 954-468-8067.

Sincerely,

Corinne Hall

Treasurer Southport Townhomes

CC: Niklas Sardana - President