

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

98 DEC 28 AM 8:34

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 770434

1. Corporation Name
 The Capri of Singer Island Condominium Association, Inc.

Principal Place of Business Mailing Address
 5250 North Ocean Drive
 Singer Island, Florida 33404

REINSTATEMENT

87-98
 AD

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida September 27, 1983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-2462989	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres	Nader Salour	5250 No. Ocean Dr. #PH-N	Singer Island, FL 33404
Sec/ Treas	Philip T. DeRing	5250 No. Ocean Dr. #12-N	Singer Island, FL 33404
Dir.	Mary Bortolussi	193 Connaught Ave	Willowdale, Ontario, Canada M2M 1H6
Dir.	Vito Colucci	34 Taylorwood Dr.	Islington, Ontario, Canada M9A 4R7
Dir	Kenneth Kucher	61 Pheasant Lane	Islington, Ontario, Canada M9A 1T5

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8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Peggy E. Lutz 5250 No. Ocean Dr. Singer Island, FL 33404		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.
 Signature of Registered Agent Peggy E. Lutz REGISTERED AGENT MUST SIGN Date 12/22/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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: Nader Salour Nader Salour 12/22/98 561-745-6400
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Nader Salour Date 12/22/98 Daytime Phone # 561-745-6400

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