


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F70939					
1. Corporation Name  EBERHARDT PROPERTIES, INC.					
2. Principal Office Address 11380 Prosperity Farms Road			3. Mailing Office Address 11380 Prosperity Farms Road		
Suite, Apt. #, etc. Suite 201			Suite, Apt. #, etc. Suite 201		
City & State Palm Beach Gardens, FL			City & State Palm Beach Gardens, FL		
Zip 33410	Country US	Zip 33410	Country US		

FILED

06 MAY -4 PM 2: 56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

900074507959  
05/12/06--01008--028 \*\*150.00

CR2E081 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida		03/15/1982	
5. EEL Number 59-2162800	Applied For <input type="checkbox"/>	Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent			
Name Andrew Helgesen, Esq.			
Street Address (P.O. Box Number is Not Acceptable) 11380 Prosperity Farms Road			
Suite, Apt. #, Etc. 201			
City Palm Beach Gardens		State FL	Zip Code 33410

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
PD	Eberhardt, Eberhard	c/o 11380 Prosperity Farms Road, #201	Palm Beach Gardens, FL, 33410
VP	Schildberg, Frank	c/o 11380 Prosperity Farms Road, #201	Palm Beach Gardens, FL, 33410

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #