

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2006 JUN 12 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F71350 1. Entity Name BAY COLONY HOMES, INC.					
Principal Place of Business C/O GEORGE D PERLMAN, P.A. 701 BRICKELL AVE STE 3000 MIAMI, FL 33131 US			Mailing Address C/O GEORGE D PERLMAN, P.A. 701 BRICKELL AVE STE 3000 MIAMI, FL 33131 US		
2. Principal Place of Business 1001 BRICKELL BAY DRIVE		3. Mailing Address 1001 BRICKELL BAY DRIVE			
Suite, Apt. #, etc. SUITE 3112		Suite, Apt. #, etc. SUITE 3112			
City & State MIAMI, FL.		City & State MIAMI, FL.			
Zip 33131		Country USA		4. FEI Number 65-0102062	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent PERLMAN, GEORGE D P.A. 701 BRICKELL AVE STE 3000 MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1001 BRICKELL BAY DRIVE SUITE 3112 City MIAM FL Zip Code 33131		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. GEORGE D. PERLMAN, PA SIGNATURE BY [Signature] GEORGE D. PERLMAN, PRESIDENT 6-7-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD KEHRMANN, MARLIESE C/O GEORGE D PERLMAN, P.A. MIAMI, FL 33131 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1001 BRICKELL BAY DRIVE, SUITE 3112 MIAMI, FL. 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CEDRATT, DENA 701 BRICKELL AVE SUITE 3000 MIAMI, FL 33131 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1001 BRICKELL BAY DRIVE, SUITE 3112 MIAMI, FL. 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Dena Cedrati, Assistant Secretary 6-7-06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					