PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT (97)

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

APPROVED AND FILED
97 NOV 20 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F72173**

1. Corporation Name
SCHATIA MANAGEMENT, INC.

Principal Place of Business	Mailing Address
% LARRY S SAZANT 2020 NE 163RD STREET, #300 NORTH MIAMI BEACH FL 33162	% LARRY S SAZANT 2020 NE 163RD STREET, #300 NORTH MIAMI BEACH FL 33162

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
C/O Kenneth A. Friedman	C/O Kenneth A. Friedman
Suite, Apt. #, etc.: 2020 NE 163 Street,#300	Suite, Apt. #, etc.: 2020 NE 163 Street,#300
City & State: N. Miami Beach, Florida	City & State: N. Miami Beach, Florida
Zip: 33162 Country: USA	Zip: 33162 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 03/23/1982

5. FEI Number: 59-2177788 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DP	SCHATIA, DAVID	1255 GREENE AVE., #200	WEST MOUNT, QUEBEC

400002356864---1
-11/25/97--01060--005
****750.00 ****750.00

REINSTATEMENT (97)

Q. Adams 11/20/97

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
FRIEDMAN, KENNETH A. 2020 NE 163 STREET, STE 300 NORTH MIAMI BEACH FL 33162	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (8/97)

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: Kenneth A. Friedman Date: 11/17/97
REGISTERED AGENT MUST SIGN

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: _____ Nov 5/97 5145535-7470
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #