

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 JUN 24 PM 12: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F92000000363**

1. Corporation Name

Credit Suisse First Boston Realty, Inc.

2. Principal Office Address
11 Madison Avenue

3. Mailing Office Address
11 Madison Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

New York, NY

City & State

New York, NY

Zip
10010

Country
USA

Zip
10010

Country
USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/20/1992

5. FEI Number
13-3123310

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street

Suite, Apt. #, Etc.

City Tallahassee

State
FL

Zip Code
USA 32301

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

John H. Pelletier

JOHN H. PELLETIER

ASST. VICE PRESIDENT

REGISTERED AGENT MUST SIGN

Date

6/12/02

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
v	Russell L. Appel	11 Madison Avenue	New York, NY 10010
v	Hideki Mitani	11 Madison Avenue	New York, NY 10010
S	Lori M. Russo	11 Madison Avenue	New York, NY 10010
M	Paul Pensa	11 Madison Avenue	New York, NY 10010
D	Thomas A. DeGennaro	11 Madison Avenue	New York, NY 10010
D	Ted Buchanan	11 Madison Avenue	New York, NY 10010

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:

John H. Pelletier

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/23/02

212-325-1994

Daytime Phone #

CR2081 (9/01)