

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

02 MAR 22 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F98000007147

1. Corporation Name

NINA NUMBER ONE (USA) LIMITED INC.

2. Principal Office Address

C/O B.K. HAIMES, THELEN REID

Suite, Apt. #, etc.

40 W. 57TH ST., 26TH FL.

City & State

NEW YORK, NY

Zip

10019

Country

USA

3. Mailing Office Address

C/O B.K. HAIMES, THELEN REID

Suite, Apt. #, etc.

40 W. 57TH ST., 26TH FL.

City & State

NEW YORK, NY

Zip

10019

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

DECEMBER 31, 1998

5. FEI Number

94-3089850

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

1999-2002 VBR

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
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

Maureen Cullen

Date

3/20/02

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
D/P/T	BURTON K. HAIMES	40 W. 57TH ST., 26TH FL.	NEW YORK, NY 10019
VP	GEORGE H. WANG	40 W. 57TH ST., 26TH FL.	NEW YORK, NY 10019
S	GORDON J. WEISS	1 BLUE HILL PLAZA, 5TH FL.	PEARL RIVER, NY 10965

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:

B. K. Haimes

BURTON K. HAIMES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-02

Date

212-603-2060

Daytime Phone #

CR2E081 (2/01)



282

ACCOUNT NO. : 072100000032

REFERENCE : 485458 4301893

AUTHORIZATION :

COST LIMIT : 608.75
~~\$ 1200.75~~

Patricia Pizitz

ORDER DATE : March 20, 2002

ORDER TIME : 11:08 AM

ORDER NO. : 485458-005

CUSTOMER NO: 4301893

CUSTOMER: Ms. Barbie Patterson
Thelen Reid & Priest LLP
40 West 57th Street
30th Floor
New York, NY 10019

RECEIVED
02 MAR 21 AM 11:24
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REINSTATEMENT

NAME: NINA NUMBER ONE (USA)
LIMITED INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS _____