PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
02 MAY -1 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

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

REINSTATEMENT 00-02

00-02

DOCUMENT # F99000002605

1. Corporation Name

K/G Tall Timbers, Inc.

W02000016453

2. Principal Office Address	3. Mailing Office Address
155 Polifly Road	1301 N.Dale Mabry Hwy
Suite, Apt. #, etc.	Suite, Apt. #, etc. 200
City & State: Hackensack, NJ	City & State: Tampa, Fl.
Zip: 07601 Country: USA	Zip: 33618 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 94-3416659 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: Allen Goins c/o AG Development

Street Address (P.O. Box Number is Not Acceptable): 1301 N. Mabry Highway

Suite, Apt. #, Etc.: 200

City: Tampa State: FL Zip Code: 33618

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***1050.00 ***1050.00

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 2/22/02

REGISTERED AGENT MUST SIGN

CR2E061 (3/00)

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
Pres.	Herbert C. Klein	c/o NAKB 155 Polifly Road	Hackensack, NJ 07601
VP	Benjamin Geller	c/o Geller Assoc. Inc. 74 S. POwder Mill Rd	Morris Plains, NJ 07950
Scty	Benjamin Geller	c/o Geller Assoc. Inc. 74 S. POwder Mill Rd.	Morris Plains, NJ07950
Trea	Herbert C. Klein	c/o NAKB 155 Polifly Road	Hackensack, NJ 07601

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 _____ 2/22/02 (201) 343-5001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Herbert C. Klein Daytime Phone #