PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 02-03

DOCUMENT # G 27006

1. Corporation Name

HYPERION, INC.

2. Principal Office Address	3. Mailing Office Address
14100 SW 136th Street	14100 SW 136th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	c/o Maryann Gleason
City & State	City & State
Miami, FL	Miami, FL
Zip: 33186 Country: USA	Zip: 33186 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida 03/08/83

5. FEI Number 59-2268191 ☐ 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: Joel Bernstein

Street Address (P.O. Box Number is Not Acceptable): 11900 Biscayne Blvd.

800015026348
04/01/03--01044--003 **900.00

Suite, Apt. #, Etc.: Suite 604

City: Miami | State: FL | Zip Code: 33181

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 3/10/03

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
COO	Victor Rana	14100 S.W. 136th Street	Miami, FL 33186
C/D	Wm. P. Murphy	14100 S.W. 136th Street	Miami, FL 33186
D	Daniel Seckinger	5900 SW 73rd Street, #208	South Miami, FL 33143
D	Richard Elias	471 Rovino Avenue	Coral Gables, FL 33156
CFO	Frank Young	14100 S.W. 136th Street	Miami, FL 33186
VP	Mark Turner	14100 S.W. 136th Street	Miami, FL 33186

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: _____ JOEL BERNSTEIN 3/10/03 305-892-1122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

HYPERION, INC.

Title	Name	Address
D	Paul Mayer	14100 S.W. 136th Street, Miami, FL 33186
D	Richard Spencer	14100 S.W. 136th Street, Miami, FL 33186
S	Joel Bernstein	11900 Biscayne Blvd., #604, Miami, FL 33181