

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 OCT -9 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G99573

1. Corporation Name CEDAR CREEK, INC.

000008402720
10/16/02--01049--022 **908.75

2. Principal Office Address
8951 W. Atlantic Blvd.

3. Mailing Office Address
8951 W. Atlantic Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Coral Springs, Fla.

City & State
Coral Springs, Fla.

Zip 33071

Country USA

Zip 33071

Country USA

**4. Date Incorporated or Qualified
To Do Business in Florida** 8-13-1984

5. FEI Number
592659761

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 Christopher L. Buttermore, Esq.

Street Address (P.O. Box Number is Not Acceptable)
432 N.E. Third Avenue -(432 N.E. Third Avenue)

Suite, Apt. #, Etc.

City Fort Lauderdale

State
FL

Zip Code
33301

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**

Christopher L. Buttermore
REGISTERED AGENT MUST SIGN

Date 10-08-2002

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
P	Ted Siegel	8951 W. Atlantic Blvd.	Coral Springs, Fl. 33071
V	Carol Siegel	8951 W. Atlantic Blvd.	Coral Springs, Fl. 33071

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:

Ted Siegel

Ted Siegel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-8-2002 954-752-4090

Daytime Phone #

CR2001 (9/01)