


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 2004 MAY 24 PM 4:53 DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA																				
DOCUMENT # <u>L 02 0000 29835</u>																							
1. Limited Liability Company's Name <u>16911 PROPERTY HOLDINGS, L.L.C.</u>																							
2. Principal Office Address <u>20383 N.E. 2nd Ave.</u> <small>Suite, Apt. #, etc.</small>		3. Mailing Office Address <u>P.O. BOX 2972</u> <small>Suite, Apt. #, etc.</small>																					
City & State <u>MIAMI, FL</u> <small>Zip</small> <u>33179</u> <small>Country</small> <u>U.S.A.</u>		City & State <u>HALLANDALE BEACH, FL</u> <small>Zip</small> <u>33008</u> <small>Country</small> <u>U.S.A.</u>																					
4. State/Country of Formation																							
5. Date Organized or Qualified To Do Business in Florida																							
6. FEI Number <u>13 422 0968</u>		Applied For <input type="checkbox"/> Not Applicable																					
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status																							
8. Name and Address of Current Registered Agent																							
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2" style="padding: 2px;"><small>Name</small> <u>BRUCE SHOLER, ESQ.</u></td><td colspan="2" style="padding: 2px;"><u>500035559305</u></td></tr><tr><td colspan="2" style="padding: 2px;"><small>Street Address (P.O. Box Number is Not Acceptable)</small> <u>2611 HOLLYWOOD BLVD.</u></td><td colspan="2" style="padding: 2px;"><u>05/06/04--01024--003 **150.00</u></td></tr><tr><td colspan="2" style="padding: 2px;"><small>Suite, Apt. #, Etc.</small></td><td colspan="2" style="padding: 2px;"><u>500035559305</u></td></tr><tr><td colspan="2" style="padding: 2px;"><small>City</small> <u>HOLLYWOOD</u></td><td colspan="2" style="padding: 2px;"><u>05/24/04--01108--003 **50.00</u></td></tr><tr><td colspan="2" style="padding: 2px;"><small>State</small> <u>FL</u></td><td colspan="2" style="padding: 2px;"><small>Zip Code</small> <u>33020</u></td></tr></table>				<small>Name</small> <u>BRUCE SHOLER, ESQ.</u>		<u>500035559305</u>		<small>Street Address (P.O. Box Number is Not Acceptable)</small> <u>2611 HOLLYWOOD BLVD.</u>		<u>05/06/04--01024--003 **150.00</u>		<small>Suite, Apt. #, Etc.</small>		<u>500035559305</u>		<small>City</small> <u>HOLLYWOOD</u>		<u>05/24/04--01108--003 **50.00</u>		<small>State</small> <u>FL</u>		<small>Zip Code</small> <u>33020</u>	
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9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.																							
<small>Signature of Registered Agent</small> <u>[Signature]</u>		<small>Date</small> <u>4/29/04</u>																					
REGISTERED AGENT MUST SIGN																							
10. Names and Street Addresses of Managing Members/Managers																							
<small>Titles</small>	<small>Name of Managing Members/Managers</small>	<small>Street Address of Each Managing Member/Manager</small>	<small>City / State / Zip</small>																				
<u>MGR.</u>	<u>F. ADESTEINCO</u>	<u>20383 N.E. 2nd Ave.</u>	<u>MIAMI, FL 33179</u>																				
REINSTATEMENT <u>2003-04</u>																							
11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.																							
<small>Signature of Managing Member/Manager</small> <u>[Signature]</u>		<small>Date</small> <u>4/29/04</u> <small>Daytime Phone #</small> <u>(775) 890-1857</u>																					
<small>Typed or printed name of signing Managing Member/Manager</small>																							

CR2E041 (10/02)