L5L

PLEASE READ ALL INSTRUCTIONS BEFORE CO

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
Feb 20 1997 8:00 am
Secretary of State

TALLAHASSEE, FLORIDA

DOCUMENT # L39262

1. Corporation Name
ORANGE NAPLES ENTERPRISES, INC.

Mailing Address / Principal Place of Business

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable	3. New Principal Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida
3111 Stirling Road	3111 Stirling Road	12/28/89
Suite, Apt. #, etc.: Suite 138-B	Suite, Apt. #, etc.: Suite 138-B	
City & State: Ft. Lauderdale, Fl	City & State: Ft. Lauderdale, FL	
Zip: 33312 Country: USA	Zip: 33312 Country: USA	

5. FEI Number: 65-0300263 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/S/D	GOLAN, Amnon	3111 Stirling Road, Suite 138-B	Ft. Lauderdale Florida 33312
VP/T/D	GOLAN, Dina	3111 Stirling Road, Suite 138-B	Ft. Lauderdale Florida 33312
VP/D	SCHACHTEL, Sari	3111 Stirling Road Suite 138-B	Ft. Lauderdale Florida 33312

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REINSTATEMENT 2-21-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name: AMNON GOLAN
Street Address (P.O. Box Number is Not Acceptable): 3111 Stirling Road
Suite, Apt. #, Etc.: Suite 138-B
City: Ft, Lauderdale State: FL Zip Code: 33312

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: A. Golan — REGISTERED AGENT MUST SIGN — Date: 2/19/97

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation 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.

SIGNATURE: A. Golan AMNON GOLAN, President 2/19/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E080 (6/96)

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 266464 4381719

AUTHORIZATION : Patricia Pyzicki

COST LIMIT : $ 1,410.00

ORDER DATE : February 20, 1997

ORDER TIME : 9:26 AM

ORDER NO. : 266464-005

CUSTOMER NO: 4381719

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CUSTOMER: George D. Perlman, Esq
Perlman & Faber, P.a.
Suite 900
799 Brickell Plaza
Miami, FL 33131

DOMESTIC FILINGS

NAME: ORANGE NAPLES ENTERPRISES, INC

XX___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS _____

RECEIVED
97 FEB 20 AM 10:39
DIVISION OF CORPORATION