PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 1 of 2

APPLICATION -FOR ~~REINSTATEMENT~~

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

200UB2

FILED
00 NOV -1 AM 9:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # L58211

1. Corporation Name

20TH AVENUE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 1650 NE 26TH ST.<br>~~SUITE~~ SUITE A<br>WILTON MANORS FL 33305<br>US | 1650 NE 26TH ST.<br>~~SUITE~~ SUITE A<br>WILTON MANORS FL 33305<br>US |

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

| 2. New Principal Office Address, If Applicable | | 3. New Mailing Office Address, If Applicable | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

4. Date Incorporated or Qualified To Do Business in Florida: 03/19/1990

5. FEI Number: 65-0194638 ☐ 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 3 | City / State / Zip 4 |
|---|---|---|---|
| P | D'ANGELO, JOSEPH | 1650 N.E 26TH STREET | WILTON MANORS FL |
| VPS | CRANE | 1650 N.E. 26TH STREET | WILTON MANORS FL |
| T | BERLINER, IRWIN | 1650 NE 26TH ST. | WILTON MANORS FL |
| | | | |
| | | | |
| | | | |

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****150.00 ****150.00

| 8. Name and Address of Current Registered Agent | 9. Name and Address of New Registered Agent |
|---|---|
| BEGGS, WILLIAM F.<br>2929 E COMMERCIAL BLVD<br>PH-A<br>FT LAUDERDALE FL 33308 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>Suite, Apt. #, Etc.<br>City / State: FL / Zip Code |

CR2E040 (8/00)

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 SIGNATURE REQUIRED Date

REGISTERED AGENT MUST SIGN

11. 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.

KE

SIGNATURE: SIGNATURE REQUIRED Joseph D'Angelo 10/30/00

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

202

# 20th Avenue, Inc.

Oct. 30, 2000

Dear Sir

I am writing to say that this is the first notice of the Annual Report I received.

I spoke with someone in your office and explained this to them. They told me to send in $150.00 and they would review the matter.

Yours Truly
Joseph D Cangelo

1650 N.E. 26th Street • Wilton Manors, FL 33305 • (305) 563-6807 • FAX: (305) 563-0778