

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

989902

FILED 26 MAR 26 11 8:41 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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DOCUMENT # L82847

1. Corporation Name ROSENTHAL HOLDINGS, INC.

Principal Place of Business C/O IRWIN M. FROST 1101 BRICKELL AVENUE SUITE 1400 MIAMI FL 33131 Mailing Address C/O IRWIN M. FROST 1101 BRICKELL AVENUE SUITE 1400 MIAMI FL 33131



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

2. New Principal Office Address, If Applicable: 200 South Biscayne Blvd. Suite 4750 Miami, FL 33131 USA 3. New Mailing Office Address, If Applicable: 200 South Biscayne Blvd. Suite 4750 Miami, FL 33131 USA

4. Date Incorporated or Qualified To Do Business in Florida: 06/19/1990 5. FEI Number: 65-0262094 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)

Table with 4 columns: Title(s), Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Row 1: D, ROSENTHAL, PAUL, 2604 N.W. 12TH ST., DELRAY BEACH FL 300002829919-7

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FROST, IRWIN M. 1101 BRICKELL AVENUE SUITE 1400 MIAMI FL 33131

Name: Street Address (P.O. Box Number is Not Acceptable): 200 South Biscayne Blvd. Suite, Apt. #, Etc: Suite 4750 City: Miami State: FL Zip Code: 33131

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

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes [] No [X]

(See other side for information on intangible tax.)

12. 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 provided on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul Rosenthal

2/2/99

Daytime Phone #

CR2E040 (9/98)