

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

96 NOV 13 AM 10:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500002005185--5
-11/14/96--01109--002
*****575.00 *****575.00

DOCUMENT # **M60488**

1 Corporation Name

Temple Court GP/MF, Inc.

Mailing Address **c/o Martin Fine, Esq.** Principal Place of Business **Martin Fine, Esquire**
701 Brickell Avenue **c/o Holland & Knight**
Suite 3000 **701 Brickell Avenue**
Miami, Florida 33131 **Suite 300**
Miami, Florida 33131

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

REINSTATEMENT *95-96*

DO NOT WRITE IN THIS SPACE

2 New Mailing Address, if Applicable
Martin Fine, Esquire

3 New Principal Office Address, if Applicable
Martin Fine, Esquire

4 Date Incorporated or Qualified To Do Business in Florida
10/08/87

Street **c/o Holland & Knight**
701 Brickell Avenue #3000
City & State **Miami, FL**

Street **c/o Holland & Knight**
701 Brickell Avenue #3000
City & State **Miami, Florida**

5 FEI Number

65-0040715

Applied For

Not Applicable

Zip **33131**

Country **USA**

Zip **33131**

Country **USA**

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)

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4 City / State / Zip |
|------------|-------------------------------------|---|-----------------------------|
| <i>P</i> | Martin Fine, Esquire | c/o Holland & Knight 701 Brickell Avenue #3000 | Miami, Florida 33131 |
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JB1-13-96

8 Name and Address of Current Registered Agent

9 Name and Address of New Registered Agent

Martin Fine, Esquire
c/o 100 SE 2nd Street - #3600
Temple Court GP/MF, Inc.
Miami, Florida 33131

Name
Martin Fine, Esquire
Street Address (P.O. Box Numbers Not Acceptable)
c/o Holland & Knight
701 Brickell Avenue
Suite, Apt. #, Etc.
Suite 3000

City **Miami**

State **FL**

Zip Code **33131**

CR2E040 (6/94)

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

Martin Fine
REGISTERED AGENT MUST SIGN

Date *11/8/96*

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:

Martin Fine **Martin Fine Pres.**

Date

11/8/96 **352-7897710**
Daytime Phone #