

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

97 SEP -4 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M82040

1 Corporation Name

UNITY REALTY CORP.

Principal Place of Business Mailing Address
4060 N. Hills Dr., # 32 4060 N.Hills Dr., #32
Hollywood, FL 33021 Hollywood, FL 33021



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

2. New Principal Office Address, if Applicable 4060 N. Hills Dr.,		3. New Mailing Office Address, if Applicable 4060 N. Hills Dr.,		4. Date Incorporated or Qualified To Do Business in Florida 05/18/1988	
Suite, Apt. #, etc. #32		Suite, Apt. #, etc. #32		5. FEI Number 65-0056572	
City & State Hollywood, FL		City & State Hollywood, FL		Applied For Not Applicable	
Zip 33021		Country USA		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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	2	3	4
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P/D	RUTH MESSER	4060 N.Hills Dr., #32	Hollywood, FL 33021

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-09/05/97--01113--023
***1253.75 ***1253.75

REINSTATEMENT 94-97
A. Adams
9/4/97

8. Name and Address of Current Registered Agent COPROLITE CORPORATION 1 SE 3RD AVE #1400 MIAMI FL 33131		9. Name and Address of New Registered Agent Name COPROLITE CORPORATION Street Address (P.O. Box Number is Not Acceptable) 1 SE 3rd Ave., #1400 Suite, Apt. #, Etc. City Miami State FL Zip Code 33131	
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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]* REGISTERED AGENT MUST SIGN President Date 09/03/97

11. 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.)

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

SIGNATURE: *Ruth Messer* 09/03/97 (305) 377-9353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #