

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 DEC -3 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # NOI 00002890
1. Corporation Name

VIRGINIA STREET CONDOMINIUM ASSOCIATION, INC.

2. Principal Office Address 2930 Virginia Street		3. Mailing Office Address 2930 Virginia Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33133	Country USA	Zip 33133	Country USA

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4. Date Incorporated or Qualified To Do Business in Florida 4/24/2001	
5. FEI Number 02-0610606	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Woodbridge & Salazar	
Street Address (P.O. Box Number is Not Acceptable) 7700 N. Kendall Drive	
Suite, Apt. #, Etc. Suite 809	
City Miami	State FL
Zip Code 33156	

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: *Maria R. [Signature]* Date: Nov. 20, 2002
REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Darren McCartney	2930 Virginia Street	Miami, FL 33133
VSD	Richard Griffiths	2922 Virginia Street	Miami, FL 33133
TD	Miriam Jaramillo	2930 Virginia Street	Miami, FL 33133

10. 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: *Darren McCartney* Date: Nov 20, 2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E081 (9/01)