

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N01000003680**

**1. Corporation Name**

**STADIUM CORNERS OWNERS ASSOCIATION, INC.**

**2. Principal Office Address**

**2121 Ponce De Leon Blvd.**

Suite, Apt. #, etc.

**PH**

City & State

**Coral Gables, Florida**

Zip

**33134**

Country

**US**

**3. Mailing Office Address**

**2121 Ponce De Leon Blvd.**

Suite, Apt. #, etc.

**PH**

City & State

**Coral Gables, Florida**

Zip

**33134**

Country

**US**

**4. Date Incorporated or Qualified  
To Do Business in Florida**

**5. FEI Number**  
**n/a**

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

**\$8.75 Additional Fee required  
for a Certificate of Status**

CR2E081 (12/05)

FILED  
06 FEB 22 PM 1:11  
RECEIVED  
TALLAHASSEE

**200067458122**  
**03/09/06--01020--022 \*\*358.75**

**7. Name and Address of Current Registered Agent**

Name

**Registered Agents of Florida, LLC**

Street Address (P.O. Box Number is Not Acceptable)

**100 S.E. Second Street**

Suite, Apt. #, Etc.

**Suite 2900**

City

**Miami**

State  
**FL**

Zip Code  
**33131**

**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

*Charles J. Rennert*

**Charles J. Rennert, V.P.**

Date **2/16/06**

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
DVC	Jorge Lopez	2121 Ponce De Leon Blvd., PH	Coral Gables, FL 33134
DCH	Stuart I. Meyers	2121 Ponce De Leon Blvd., PH	Coral Gables, FL 33134
DS	Joseph Wieselberg	9655 S. Dixie Highway, Suite 200	Miami, FL 33156

**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 contained in Chapter 119, 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:**

*Joseph Wieselberg*

**Joseph Wieselberg, Secretary**

**2/16/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



BERMAN RENNERT  
VOGEL & MANDLER, P.A.  
ATTORNEYS AT LAW

February 21, 2006

**VIA FEDEX**

Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399  
Attn: Reinstatements

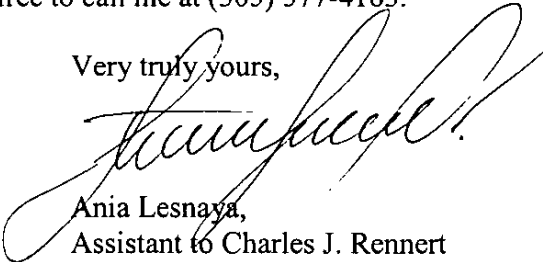
Re: Stadium Corners Owner's Association, Inc.  
Document No.: N01000003680

To whom it may concern:

Enclosed is the Reinstatement Application for the above referenced entity together with the check in the amount \$358.75 made payable to Florida Department of State.

If you have any questions, feel free to call me at (305) 577-4163.

Very truly yours,



Ania Lesnaya,  
Assistant to Charles J. Rennert

Enclosures

G:\REAL ESTATE -- All Open Files\C\Cornerstone\Entities\Stadium Corners Owner's Association, Inc\ltr. to DOS re reinstatement 2-21-06.DOC