
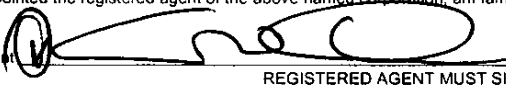
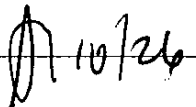



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 07 OCT 24 PM 1:20 SECRETARY OF STATE TALLAHASSEE, FLORIDA 600111301626 10/24/07--01049--014 **420.00 REINSTATEMENT 04-07	
DOCUMENT # N03000010628					
1. Corporation Name Sole Condominium Association, Inc.					
2. Principal Office Address - No P.O. Box # 17315 Collins Ave Suite, Apt. #, etc.		3. Mailing Office Address 17315 Collins Ave. Suite, Apt. #, etc.			
City & State Sunny Isles Beach, FL		City & State Sunny Isles Beach, FL			
Zip	Country	Zip	Country		
7. Name and Address of Current Registered Agent				4. Date Incorporated or Qualified To Do Business in Florida 12/8/2003	
Name Steven W. Zelkowitz, Esq.				5. FEI Number <input checked="" type="checkbox"/> Applied For - <input type="checkbox"/> Not Applicable	
Street Address (P.O. Box Number is Not Acceptable) 401 E. Las Olas Blvd.,				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
Suite, Apt. #, Etc. #1850				<input checked="" type="checkbox"/> The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.	
City Fort Lauderdale		State FL	Zip Code 33301		
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 		Date 10/23/07			
REGISTERED AGENT MUST SIGN STEVEN W. ZELKOWITZ					
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	
P	Thomas Feeley	17315 Collins Ave.		Sunny Isles Beach, FL 33160	
VP	David Ceva	17315 Collins Ave.		Sunny Isles Beach, FL 33160	
Secy					
Treas.	David Ceva	17315 Collins Ave.		Sunny Isles Beach, FL 33160	
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 		Date 10/23/07		Daytime Phone # 454 761 8111	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STEVEN W. ZELKOWITZ					