2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N04000001646

1. Entity Name
WESTON COMMERCIAL CENTER B OWNERS ASSOCIATION, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC 17 AM 8:01

Principal Place of Business	Mailing Address
2950 GLADES CIRCLE WESTON, FL 33326	P.O. BOX 268025 WESTON, FL 33326

12162008 REIN-NP CR2E099 (1/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	10598 NW South River Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Miami, Florida
Zip / Country	Zip: 33178 / Country

4. FEI Number: 20-2305888 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCDONOUGH, RICHARD W
1786 NW 55 AVE
FORT LAUDERDALE, FL 33313

7. Name and Address of New Registered Agent

Name: ARTHUR LITTMAN JR.
Street Address (P.O. Box Number is Not Acceptable): AMERICAS Property Management Corp
10598 NW. South River DR
City: MIAMI FL Zip Code: 33178

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 12/16/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: **Registered Agent signature required when reinstating**) DATE

FILE NOW!!! FEE IS $61.25
After January 1, 2009, Fee will be $122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FURNARI, FRANCESCO 2950 GLADES CIRCLE #2 WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800139104868 12/17/08--01037--007 **70.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V GABALDON, RAFAEL 2950 GLADES CIRCLE #15 WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PATRUNO, SERGIO 709 LAKE BLVD. WESTON, FL 33326	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 12/16/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #