


2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

07 JAN 19 PM 3:42

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # N05000012877 1. Entity Name THE YACHT CLUB CONDOMINIUM ASSOCIATION OF HALLANDALE, INC.	
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Principal Place of Business 301-307 GOLDEN ISLES DRIVE HALLANDALE BEACH, FL 33009	Mailing Address 301-307 GOLDEN ISLES DRIVE HALLANDALE BEACH, FL 33009
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State Zip Country	City & State Zip Country
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REINSTATEMENT 06-07

4. FEI Number 20-8244594	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LIEBER, OREN D ESQ 555 NE 15TH STREET STE 100 MIAMI, FL 33132	7. Name and Address of New Registered Agent Name Luis Alonso Street Address (P.O. Box Number is Not Acceptable) 4937 S.W. 75 Avenue, Bldg. B#21 City Miami FL Zip Code 33155
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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.

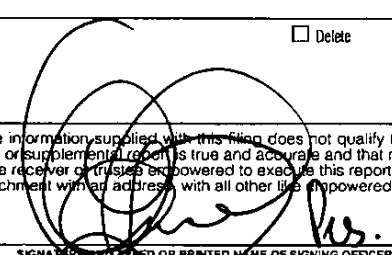
800086175598
01/25/07--01009--001 **297.50

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$297.50		Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DV SAGARO, MICHAEL <input checked="" type="checkbox"/> Delete 1840 MAIN STREET STE 102 WESTON, FL 33326	TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Luis Alonso 4937 S.W. 75 Avenue, Bldg B # 21 Miami, Fl 33155
TITLE	DST ORTEGA, ALINA <input checked="" type="checkbox"/> Delete 1840 MAIN STREET STE 102 WESTON, FL 33326	TITLE	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Marlon Blanco 4937 S.W. 75 Avenue, Bldg. B # 21 Miami, Fl 33155
TITLE	<input type="checkbox"/> Delete	TITLE	Secretary/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Humberto Solares 4937 S.W. 75 Avenue, Bldg. B # 21 Miami, Fl 33155
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 files empowered.

SIGNATURE:  _____
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____