2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002050

Oct 24, 2007 Secretary of State

Entity Name: HALLANDALE OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

20141 NE 21ST AVE 212 NE 3RD STREET 13

MIAMI, FL 33179

HALLANDALE BEACH, FL 33009

Current Mailing Address: New Mailing Address:

20141 NE 21ST AVE 212 NE 3RD STREET

MIAMI, FL 33179 HALLANDALE BEACH, FL 33009

FEI Number: 20-4439412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COYLE, THOMAS F JR GOTTFRIED, ISREAL 100 W CYPRESS CREEK ROAD SUITE 700 212 N.E. 3RD STREET

FT LAUDERDALE, FL 33309 HALLANDALE BEACH, FL 33009 US

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.

SIGNATURE: ISREAL GOTTFRIED 10/24/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP (X) Change () Addition () Delete

SHAN, RICHARD GOTTFRIED, ISREAL Name: Name: 20141 NE 21ST AVE Address: 212 NE 3RD STREET, #6 Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip: HALLANDALE BEACH, FL 33009

Title: DST Title: (X) Change () Addition () Delete TARTELL, JODI Name: ESPINOZA, CAROLINA Name: Address: 20141 NE 21ST AVE Address: 212 N.E. 3RD STREET #3

City-St-Zip: MIAMI, FL 33179 City-St-Zip: HALLANDALE BEACH, FL 33009

Title: () Delete Title: DS (X) Change () Addition SONNE-SHAN, BETTY MELGAR, JORGE L Name: Name:

20141 NE 21ST AVE Address: Address: 212 NE 3RD STREET #11 City-St-Zip: MIAMI, FL 33179 City-St-Zip: HALLANDALE BEACH, FL 33009

Title: () Delete Title: DT () Change (X) Addition

Name: Name: SILVINA, SONIN Address: Address: 212 NE 3RD STREET #7 City-St-Zip: City-St-Zip: HALLANDALE BEACH, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISREAL GOTTFRIED DP 10/24/2007