ÞLEASE RE	AD ALL INSTRUC	TIONS BEFORE		ING THIS FO	RM. 4	
CORPORATION REINSTATEMENT			FILED 10 APR 27 PM 12: 39			
DOCUMENT # N0700004469 1. Corporation Name GROVE SYNAGOGUE, INC.			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Office Address - No P.O. Box #	3. Mailing Office Ad	dress	11 04/27	0 01 780 71001017-	0 14491 010 **5180.25	
21301 Powerline Road 21301 Suite, Apt. #, stc. Suite, Apt. # Suite, Apt. # 1.04 104		4. Da		EINSTATEMENT(10) 08-10		
City & State City & State Boca Raton, Florida Boca Ra		aton, Florida 5. FEI Num 26-065		· · · · · · · ·		
Zip Country 33433 USA	Zlp 33433	Country USA	6. SEDTIFICATE OF STATUS DESIRED T \$8.75 Additional P		\$8.75 Additional Gas sumicat	
7. Name and Add Name CLASP, INC. Street Address (P.O. Box Number is Not Acc 3001 Tamiami Trail Nort)	gent	PROFIT CORPORATIONS ONLY The \$600.00 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		ent fee is imposed, which the entity did tices. By checking		
Suite, Apt. #, Etc. 400 City Naples		State Zip Code FL 33433		ived and requesting		
8. I, being appointed the registered agent of Signature of Registered Agent			bligations of sectio	Date 4/2	03, F.S. 1/10	
9. Names and Street Addresses of Each Off	icer and/or Director (Florida nor	nprofit corporations must list at le	ast 3 directors)			
Titles Name of Officers and/or Di		Street Address of Each Officer and/or Director		-	ly / State / Zip	
D Jonathan S. Agus	Sui	21301 Powerline Road Suite 104		Boca Raton,	Florida 33433	
D Itzhak Ashkenazy	Sui	21301 Powerline Road Suite 104			Florida 33433	
D Jeffrey Weiss	212	21237 Harrow Court		Boca Raton,	Florida 33433	
		pule?		· · · · · · · · · · · · · · · · · · ·	I	
		, •			· · · · · · · · · · · · · · · · · · ·	
^{0.} E-mail Address <u>: mrodrigu</u>	ez@cl-law.com	To be used for future annual report	notification			
 I certify that I am an officer or director of filing this reinstalement application, the reas fees owed by the corporation have been pa 	r the receiver or trustee empo ion for dissolution has been elin	owered to execute this applica pinated, the corporate name satis	tion as provided	ints of section 607,040	1 or 617,0401, F.S., that all	
as if made under cath. SIGNATURE:	un IM J	onathan S. Agus		<u>4-21-D</u> Date	954 - 978 - 2429 Daytime Phone #	
	11 /		· •		-	

---- --

-.

.

. ...

••• •

....

.

. . .