

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT



DOCUMENT # N47149

1. Entity Name
SEVENTH HORIZON CONDOMINIUM, INC.

Principal Place of Business
**18901 NE 14 AVENUE
MIAMI, FL 33179**

Mailing Address
**18901 NE 14 AVENUE
MIAMI, FL 33179**

FILED
07 OCT 12 PM 4:50
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

10072007 REIN-NP

CR2E099 (1/07)

4. FEI Number
59-1227720

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMYLE, MORRIS
18901 NE 14 AVENUE
MIAMI, FL 33179**

Name **Morris Smyle**
Street Address **18901 NE 14 Ave**
P.O. Box Number is Not Acceptable

City **Miami** FL Zip Code **33179**

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

Morris Smyle

10/7/07

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, 2008, 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 Delete
NAME **DP SMYLE, MORRIS**
STREET ADDRESS **18901 NE 14TH AVE.**
CITY-ST-ZIP **MIAMI, FL 331794037**

TITLE Change Addition
NAME **SHALOM Mayberg**
STREET ADDRESS **18901 NE 14th Ave**
CITY-ST-ZIP **Miami, FL 33179**

TITLE Delete
NAME **DT PARAPAR, GUILLERMO**
STREET ADDRESS **18901 NE 14TH AVE.**
CITY-ST-ZIP **MIAMI, FL 33179**

TITLE Change Addition
NAME **Zalman Mayberg**
STREET ADDRESS **18901 NE 14th Ave**
CITY-ST-ZIP **Miami, FL 33179**

TITLE Delete
NAME **DT WALSH, ELIZABETH**
STREET ADDRESS **18901 NE 14TH AVE**
CITY-ST-ZIP **MIAMI, FL 33179**

TITLE Change Addition
NAME **Linda Sierra**
STREET ADDRESS **18901 NE 14th Ave**
CITY-ST-ZIP **Miami FL 33179**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **Ted Jones**
STREET ADDRESS **18901 NE 14th Ave**
CITY-ST-ZIP **Miami FL 33179**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **800110744008**
STREET ADDRESS **10/12/07--01065--007 **\$61.25**
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **REINSTATEMENT 2007**
STREET ADDRESS
CITY-ST-ZIP

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:

Morris Smyle

Date **10/07/07** Daytime Phone #

305-944-9922