PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REMARKS	
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

FILED

02 APR 22 AM 8: 54

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT# N47660

1. Corporation Name

2. Principal Office Address

The Miami River Neighborhood Restoration Corporation, Inc.

W02-810

3. Mailing Office Address

118 SW Sc	o. River Dr	ive			161 D	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	t = 3,	4. Date Incorporated or Qualified		
	·			To Do Business in Florida	3/2/1992	
City & State— Miami, _Fl		City & State		5. FEI Number		ed For
Zip 33130	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED	NOLA	
		7. Name	and Address of Current Re	egistered Agent		
Name	Sa	allye Jude	ţ	المراجع والمراجع والمراجع والمراجع والمراجع		
	ddress (P.O. Box Number 18 SW South	er is Not Acceptable)	e		20104002 50****36	
	pt. #, Etc.		. `			.30
City	iami		,	State Zip Code		

8.	1, being appointed the registered agent of the above named corporation, am fa	miliar with and accept the obligations of section 607,0505 or 617,0503, F.S

Signature of Registered Agent

REGISTERED AGENT MIDST SIGN

Date 12/20/01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D . P	Sallye Jude	_118_SW SoRiver Drive-	-Miami, FL- 33130
D S	David M. Turner	19 West Flagler_St.#600	Miami, FL33130
D	Jane Caporelli	118 SW So. River Drive	Miami, FL 33130

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED WARE OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

.

0000110000



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 10, 2002

THE MIAMI RIVER NEIGHBORHOOD RESTORATION CORPORATION, I 118 SW SO. RIVER DRIVE MIAMI, FL 33130 US

SUBJECT: THE MIAMI RIVER NEIGHBORHOOD RESTORATION CORPORATION, INC.
Ref. Number: N47660

We have received your document for THE MIAMI RIVER NEIGHBORHOOD RESTORATION CORPORATION, INC. and check(s) totaling \$367.50. However, your check(s) and document are being returned for the following:

You failed to make the correction(s) requested in our previous letter.

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner Senior Section Administrator

Letter Number: 502A00021319



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 17, 2002

RUM ISLAND CONDOMINIUM OWNERS ASSOCIATION, INC. POST OFFICE BOX 2259 FT. WALTON BEACH, FL 32549

SUBJECT: RUM ISLAND CONDOMINIUM OWNERS ASSOCIATION, INC.

Ref. Number: N00000007268

We have received your document for RUM ISLAND CONDOMINIUM OWNERS ASSOCIATION, INC. and check(s) totaling \$122.50. However, your check(s) and document are being returned for the following:

Please accept our apology for failing to mention this in our previous letter.

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2001 corporate annual report/uniform business report form. To reinstate, the corporation must submit a completed reinstatement application or annual report/uniform business report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year.

Therefore, the total amount due to reinstate the corporation is \$297.50. Add an additional \$8.75 for each certificate of status requested.

The only provision the Division of Corporations has for waiver of the \$400.00 late fee is due to non-receipt of the original uniform business report (UBR). A letter stating non-receipt will need to accompany the completed UBR.

After the corrections-have been made, please return the report to:-Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Barbara Mitchell Document Specialist

Letter Number: 402A00002481