

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Mar 03, 2005
Secretary of State

DOCUMENT# N93000001279

Entity Name: THE SHELBOURNE APARTMENT BUILDING, INC.

Current Principal Place of Business:

710 JEFFERSON AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

PO BOX 398988
MIAMI BCH, FL 332398988

New Mailing Address:

945 PENNSYLVANIA AVE
MIAMI BCH, FL 33139

FEI Number: 65-0457251 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ALIBERTI, MICHAEL A MSW
710 JEFFERSON AVENUE
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

DATORRE, ROBERTO
945 PENNSYLVANIA AVE
MIAMI BEACH, FL 33139 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: ROBERTO DATORRE

03/03/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOOD, RICHARD
Address: 945 PENNSYLVANNIA AVE
City-St-Zip: MIAMI, FL 33139

Title: D () Delete
Name: DATORRE, ROBERTO
Address: 945 PENNSYLVANIA AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: TERE, ANGEL
Address: 945 PENNSYLVANIA AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: P () Delete
Name: WALLORE, STEFFI
Address: 945 PENNSYLVANIA AVE.
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: DATORRE, ROBERTO
Address: 945 PENNSYLVANIA AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WALLACE, STEFFI
Address: 945 PENNSYLVANIA AVE.
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD WOOD

D

03/03/2005

Electronic Signature of Signing Officer or Director

Date