PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 DEC 19 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000002278

1. Corporation Name

MALTA PROJECTS OF SOUTHEASTERN FLORIDA, INC

REINSTATEMENT 03
11-17-03 01103 001 $61.25

2. Principal Office Address	**3.** Mailing Office Address
13662 Deering Bay Dr.	13662 Deering Bay Dr.
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: Coral Gables Fla.	City & State: Coral Gables Fla.
Zip: 33158 Country: —	Zip: 33158 Country: —

4. Date Incorporated or Qualified To Do Business in Florida: 06/10/1993

5. FEI Number: 65-0416447 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Carney, Thomas Jr.
400025629464
12/19/03--01026--004 $175.00
Street Address (P.O. Box Number is Not Acceptable): 1101 N. Congress Ave
Suite, Apt. #, Etc.: Suite 200
City: Boynton Beach State: FL Zip Code: 33426

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Thomas F. Carney Jr
REGISTERED AGENT MUST SIGN
Date: 12/16/2003

CR2E081 (10/02)

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
T	Smith, Hershel F. Jr	24 Dockside Ln. #452	Key Largo Fla 33037
S	Carney, Alice	1033 Waterway Lane	Delray Beach Fla. 33483
D	Flood, Thomas J.	17 Nurmi Dr	Ft. Lauderdale Fla 33301
AS	Carney, Thomas F. Jr.	811 George Bush Blvd.	Delray Beach Fla 33483
D	Flood, Sara	17 Nurmi Dr.	Ft Lauderdale Fla. 33301
P	Frank Cripper	13662 Deering Bay Dr	Coral Gables Fla. 33158

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 filing 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: Frank Cripper Jr President - Chairman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 12/16/2003
Daytime Phone #: 305 238/042