

FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM 8:24

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**DOCUMENT #** P00000005181

**1. Corporation Name**

Mizner Grande Realty, Inc.

**2. Principal Office Address**

155 N. E. Spanish River Blvd.

Suite, Apt. #, etc.

**3. Mailing Office Address**

155 N. E. Spanish River Blvd.

Suite, Apt. #, etc.

**City & State**

Boca Raton, Florida

**City & State**

Boca Raton, Florida

**Zip**

33431

**Country**

Palm Beach

**Zip**

33431

**Country**

Palm Beach

**4. Date Incorporated or Qualified  
To Do Business in Florida**

1/18/2000

**5. FEI Number**

043588200

**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**

Ari Albinder

**Street Address (P.O. Box Number is Not Acceptable)**

155 N. E. Spanish River Blvd.

Suite, Apt. #, Etc.

**City**

Boca Raton

State  
**FL**

Zip Code  
33431

**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

Ari Albinder

REGISTERED AGENT MUST SIGN

Date 10/4/03

**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
DP	Ari Albinder	155 N. E. Spanish River Blvd.	Boca Raton, FL 33431

**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 118.07(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:**

*Ari Albinder*

10/4/03

561-393-7000

CR25081 (10/02)