PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P00000037821

SUNEAST LAND DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

1034 NW 4TH AVE

1034 NW 4TH AVE

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SECRETARY OF STATE TALLAHASSEE FLORIDA



BOCA RATON FL 33432 BOCA RAT		BOCA RATON	N FL 33432			
If above addresses are	incorrect in any way, line	through incorrect in	nformation and enter o	correction below.	2/13/01 90053 036 - 50	
New Principal Office Address, If Applicable New Mail		ling Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida		
-Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		04/14/2000	
City & State		City & State			65 - 1 42 7 0 2 Not Applicable	
Zip Country		Zip Country		y	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Ad	ddresses of Each Officer a	nd/or Director (Flo	rida nonprofit corpora	tions must list at lea	east 3 directors)	
Title(s) Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director				
D SHAFAGHI, IRAJ			1034 NW 4TH AVE		BOCA RATON FL 33432	
				<u> </u>		
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	ne and Address of Curre	at Davidsand &		ı		
o. Ran	ne and Address of Curre	nt Hegistered Age	y, Name and Address of New Re		9. Name and Address of New Registered Agent	
SHAFAGHI, IRAJ						
1034 NW 4TH AVE				Street Address (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33432 Suite, Apt. #, Etc.				c		
				City	State Zip Code	

11. 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:

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

<u>(954)-214-7</u>584

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SUNEAST LAND DEVELOPMENT, INC. 1034 NW 4th AVE BOCA RATON.FL 33432 TEL:954-272-6005 FAX:954-272-6001

DATE:10/18/01

Division of Corporations
Annual Report/Reinstatement Section
P.O.Box 6327
Tallahassee, Fl 32314-6327

To Whom It May Concern:

This letter is to confirmed that I did not receive any rejection letter from Florida Department of State regarding my company.

Enclosed is my Forms along with my FED ID NUMBER and copy of my check that I send to the Department.

Please do not hesitate to call me if you need additional information.

Sincerely Yours

Iraj Shafaghi

President