

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAR 28 PH 5:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 700000069806

1. Corporation Name

Morgan Drive Investment, Inc.

REINSTATEMENT

CR2E081 (12/05)

2. Principal Office Address
300 S. Pointe Drive

3. Mailing Office Address
300 S. Pointe Drive

Suite, Apt. #, etc.
Suite 2302

Suite, Apt. #, etc.
Suite 2302

City & State
Miami Beach, FL

City & State
Miami Beach, FL

Zip
33139

Country
USA

Zip
33139

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida **July 21, 2000**

5. FEI Number
65-1026003

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
William N. Jaeger

Street Address (P.O. Box Number is Not Acceptable)
300 S. Pointe Drive

Suite, Apt. #, Etc.
Suite 2302

City
Miami Beach

State
FL

Zip Code
33139

700074539247

05/12/06--01067--011 **105.75

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 *William N. Jaeger*
REGISTERED AGENT MUST SIGN

Date **27 MAR 2006**

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
P/D	William N. Jaeger	300 S. Pointe Dr., Suite 2302	Miami Beach, FL 33139

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 contained in Chapter 119, 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:

William N. Jaeger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 MAR 2006

Date

305-793-8205

Daytime Phone #