

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000000571

1. Entity Name
FIRST DEVELOPMENT FUND, CORP.

REINSTATEMENT

FILED

05 DEC 20 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
5600 COLLINS AVE.
#15N
MIAMI BEACH, FL 33140

Mailing Address
5600 COLLINS AVE.
#15N
MIAMI BEACH, FL 33140

2. Principal Place of Business
12 LEXINGTON AVE
Suite, Apt. #, etc.

3. Mailing Address
12 LEXINGTON AVE
Suite, Apt. #, etc.



12092005 REIN-P CR2E098 (6/04)

City & State
TOMS RIVER, NJ
Zip
08754
Country

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TOMS RIVER, NJ
Zip
08754
Country

4. FEI Number
01-0593931
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AIZENSTAT, NATAN
5600 COLLINS AVE. #15N
MIAMI BEACH, FL 33140

7. Name and Address of New Registered Agent

Name
GERALD SPIELMAN
Street Address (P.O. Box Number is Not Acceptable)
400 ALTON RD APT 311
City
MIAMI BEACH
FL Zip Code
33139

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

GERALD SPIELMAN

12/13/05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME AIZENSTAT, NATAN
STREET ADDRESS 5600 COLLINS AVE #15N
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☒ Delete

TITLE P
NAME GERALD SPIELMAN
STREET ADDRESS 400 ALTON RD. APT 311. MIAMI BEACH FL
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE VPD
NAME DUNAYEVICH, SILVIA L
STREET ADDRESS 5600 COLLINS AVE #15N
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☒ Delete

TITLE V
NAME JOSEPH SCUTELLARO
STREET ADDRESS 12 LEXINGTON AVE. TOMS RIVER. NJ 08754
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE SD
NAME AIZENSTAT, NATAN
STREET ADDRESS 5600 COLLINS AVE #15N
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
100062291721
12/20/05--01035--009 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Scutellaro

Date

Daytime Phone #

12/13/05 (732) 240-1099