2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 28, 2004
Secretary of State

DOCUMENT# P02000093120

Entity Name: NCDC ALLAPATTAH GARDENS, INC.

Current Principal Place of Business:

5400 N.W. 22ND AVENUE
SUITE 701
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

5400 N.W. 22ND AVENUE
SUITE 701
MIAMI, FL 33142

New Mailing Address:

FEI Number: 59-2146664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCDONOUGH, BRIAN J
2200 MUSEUM TOWER
150 WEST FLAGLER STREET
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: C. SULLIVAN CULVER,
Address: 4513 NW 33RD AVENUE
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: PERCY, TERRY V
Address: 6001 NW 7TH AVENUE #100
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: GABRIEL, ROBERT C
Address: 1732 NW 59TH STREET
City-St-Zip: MIAMI, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change ( ) Addition
Name: PERCY, TERRY V
Address: 6001 NW 7TH AVENUE #100
City-St-Zip: MIAMI, FL

Title: DT (X) Change ( ) Addition
Name: GABRIEL, ROBERT C
Address: 1732 NW 59TH STREET
City-St-Zip: MIAMI, FL

Title: P ( ) Change (X) Addition
Name: WILLIAMS, SHARON Y
Address: 5400 NW 22 AVENUE, SUITE 701
City-St-Zip: MIAMI, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON Y. WILLIAMS P 10/28/2004

Electronic Signature of Signing Officer or Director — Date