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	 	PLEASE	KEAD /	ALL INS	IRUC	HONS E	BEFORE	COMPLET	ING IT	113 FURIN			
	RPORAT STATEM	(5. 845			Secreta	RTMENT (ry of State corporati			06	APR -5	5 <i>E</i> .1 1	1:40	
DOCUMENT # P03000036650 1. Corporation Name									[.]		ı	, *	
DEA	N BUI	LDING,	INC.										
2. Principal Office Address 3. Mailing (Office Address			-					
	1500 Harbor Blvd				PO Box 60195				CR2E081 (12/05)				
				Suite, Apt. #, etc.			1						
	· ·							4. Date Incorporated or Qualified To Do Business in Florida 4/1/03					
City & State City & St								5. FEI Numbe			_,	Applied For	
Weehawken NJ			Ft My	ers,				58657			Not Applicable		
Zíp 0708	6	Country		33906		USA		6. CERTIFICATE	OF STATUS	DESIRED S	8.75 Addition for a Certif	onal Fee required icate of Status	
				7. 1	tame and	Address of C	urrent Registe	red Agent					
	Name JONATHAN D. BELOFF, ESQ.												
÷	Street Address (P.O. Box Number is Not Acceptable) 1111 Lincoln Rd												
•	Suite, Apt. #, Etc. Suite 400												
	City Mia	umi Bead	ch					·	State FL	Zip Code 33139			
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 REGISTERED AGENT MUST SIGN Date 3 - 2 7 - 0 6													
9. Names a	and Street Ad	dresses of Each	Officer and/	or Director (Flo	rida nonpr	ofit corporatio	ns must list at le	east 3 directors)					
Titles		Name Officers and/or					Address of Each and/or Directo			City / St	ate / Zip		
P S	STEVEN ISRAEL				40 E 78th St, Apt 11D			New York, NY 10021					
						200070227162 04/14/06f-01042014 **350.00							
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	ATTENIEUTE I NO												
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								04/12	/060	104201	(15. 5 **	100.00	
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 fling 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, another signature shall have the same legal effect as if made under oath.													
SIGNATURE: Steven Israel 3/6/06/201-319-5100													

Myers

BELOFF & SCHWARTZ ATTORNEYS AT LAW

JONATHAN D. BELOFF, ESQ.

1111 LINCOLN ROAD SUITE 400 MIAMI BEACH, FLORIDA 33139

TELEPHONE (305) 673-1101 FACSIMILE (305) 673-5505 E-MAIL jdb@southbeachlaw.com

April 3, 2006

VIA FEDERAL EXPRESS

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re: Reinstatement Dean Building, Inc. - Doc #P03000036650

Dear Sir or Madam:

It has recently come to our attention that the above referenced corporation never received the annual report forms from your office. Accordingly, we request that the reinstatement fee be waived. Enclosed please two checks totaling \$450.00 which represents the Annual Report Fee and Supplemental Fee for filing the enclosed Reinstatement form. I am also attaching a stamped, self-addressed envelope for your convenience in returning the stamped copy for our records.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

JONATHAN D. BELOFF

JDB:asr Encls.