2005 FOR PROFIT CORPORATION REINSTATEMENT

1. Entity Nam	MENT # P03000067 LTY CORP.	083		FILED 05 APR 12 PM 3:59
Principal Place 1974 NW 15 HALLANDALE	<u>t</u> ci	Mailing Address 1 974 NW 1ST CT H ALLANDALE, FL 3300	9	SECKETAL TALĻAHASYLE, FLORDA
2. Principal Place of Business 1075 NW 135 CUULT 1075 NW 135 Suite, Apt. #, etc. 3. Mailing Address 1075 NW 135 Suite, Apt. #, etc.			157 CUULT	- FENSTATENEEM T.04-05.
City & State	ANDALE FL.	HALLAN Sm	E PL	4. FEI Number Applied For Not Applied For Not Applied For Not Applicable 5. Cartificate of Status Desired S8.75 Additional
3 3 0 0	ا ا	33009	Country	Certificate of Status Desired
PLANTATION, FL 33324				4.4.4.
	named entity submits this statement for ions of registered agent.	the purpose of changing its		stered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and falls if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
FILE NOW!!! FEE IS \$900.00				
10.	OFFICERS AND I		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MERGI, MORRIS 1161 NE 169TH TERRACE NORTH MIAMI, FL 33162	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BOAZIZ, MORDECHAI 4044 N MERIDIAN AVE MIAMI BEACH, FL 33140	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. Change ☐ Addition
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 omnewored.				
SIGNATURE: × 4/8/65 × 954 457 8815 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date				

April 8, 2005

SIMI REALTY CORP. 1075 NW 1st COURT HALLANDALE BEACH, FL33009

Enclosed is 2004-2005 corporate annual reinstatement report and our check in the amount of \$300.00 (\$150.00 for 2004 and \$150.00 for 2005). We did not receive the annual reports, because you had wrong address on the report.

Please reinstate the corporation.
We respectfully request waving all penalties.

Sincerely,

Morris Mergi

President