

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000006604

FILED  
Mar 14, 2006  
Secretary of State

Entity Name: DELRAY COMMONS OF PALM BEACH, INC.

## Current Principal Place of Business:

4801 S. UNIVERSITY DRIVE, SUTIE 116  
DAVIE, FL 33328

## New Principal Place of Business:

1920 HALLANDALE BEACH BLVD.  
#602  
HALLANDALE, FL 33009

## Current Mailing Address:

4801 S. UNIVERSITY DRIVE, SUTIE 116  
DAVIE, FL 33328

## New Mailing Address:

P.O. BOX 661169  
MIAMI SPRINGS,, FL 33266

FEI Number: 20-0795147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PERLSTEIN, ARNOLD ESQ.  
4801 S. UNIVERSITY DRIVE, SUTIE 116  
DAVIE, FL 33328 US

## Name and Address of New Registered Agent:

PERLSTEIN, ARNOLD ESQ.  
441 MONTCLAIRE DR  
WESTON, FL 33326 US

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: ARNOLD PERLSTEIN

03/14/2006

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: ALWEISS, ALAN  
Address: 4801 S. UNIVERSITY DRIVE, SUTIE 116  
City-St-Zip: DAVIE, FL 33328

Title: D ( ) Delete  
Name: ALWEISS, IRA  
Address: 4801 S. UNIVERSITY DRIVE, SUTIE 116  
City-St-Zip: DAVIE, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ALWEISS, ALAN  
Address: 1920 HALLANDALE BEACH BLVD. #602  
City-St-Zip: HALLANDALE, FL 33009

Title: D (X) Change ( ) Addition  
Name: ALWEISS, IRA  
Address: 1920 HALLANDALE BEACH BLVD., #602  
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: IRA ALWEISS

D

03/14/2006

Electronic Signature of Signing Officer or Director

Date