2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000033776

Entity Name: EASTCOAST COMMUNITIES, INC.

6499 N POWERLINE RD 101

FORT LAUDERDALE, FL 33309

Address: City-St-Zip: FILED Mar 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6499 N POWERLINE RD STE 101 6499 N POWERLINE RD FORT LAUDERDALE, FL 33309 101 FORT LAUDERDALE, FL 33309 **Current Mailing Address: New Mailing Address:** 6499 N POWERLINE RD STE 101 6499 N POWERLINE RD FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 FEI Number: 90-0152936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KRINZMAN, ALAN E ESQ BENSCH, C. SCOTT 2601 S BAYSHORE DR SUITE 1600 6499 N POWERLINE RD FORT LAUDERDALE, FL 33309 US MIAMI, FL 33133 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: C. SCOTT BENSCH 03/07/2008 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BENSCH, C. SCOTT Name: Name: 6499 N POWERLINE RD 101 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: Title: (X) Delete Title: () Change () Addition GERSHOWITZ, BRYAN S Name: Name: 6499 N POWERLINE RD 101 Address: Address: FORT LAUDERDALE, FL 33309 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition HALL, ROBERT M Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: C. SCOTT BENSCH 03/07/2008 D