PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2010 MAR 15 P 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000110055

1. Corporation Name

MKSR PROPERTIES CORP.

400172200764
03/15/10--01020--019 **450.00
CR2E081 (11/09)

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
1451 S MIAMI AVENUE		1451 S MIAMI AVENUE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
STE 1012		STE 1012	
City & State		City & State	
MIAMI, FL		MIAMI, FL	
Zip	Country	Zip	Country
33130	US	33130	US

4. Date Incorporated or Qualified To Do Business in Florida 08/08/2005

5. FEI Number 43-2087320 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: SUPERBIZ REGISTERED AGENT, INC.

Street Address (P.O. Box Number is Not Acceptable): 2761 VISTA PARKWAY

Suite, Apt. #, Etc.: STE E4

City	State	Zip Code
WEST PALM BEACH	FL	33411 US

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: Paul Smith Paul Smith, V.P. Date 3/12/2010
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Abdul S Hissami	1451 S Miami Avenue, Ste 1012	Miami, Florida 33130
T	Marcel Hissami	1451 S Miami Avenue, Ste 1012	Miami, Florida 33130
D	Luz C Hissami	1451 S Miami Avenue, Ste 1012	Miami, Florida 33130
D	Ricardo Velez	1451 S Miami Avenue, Ste 1012	Miami, Florida 33130

REINSTATEMENT 28-10 gk

10. **E-mail Address:** shissami@gmail.com
(To be used for future annual report notification)

11. 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 filing 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. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Abdul S Hissami, President 02/23/10 not needed
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #