

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

97 NOV 10 PM 4:34

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P26459**

1. Corporation Name
ORIXGP INTRACOASTAL CORPORATION

Principal Place of Business C/O ORIX USA CORP 780 THIRD AVENUE NEW YORK NY 10017-7088	Mailing Address C/O ORIX USA CORP 780 THIRD AVENUE NEW YORK NY 10017-7088
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 10/13/1989	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 13-3543246	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	



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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	SEKO, AKIRA	780 THIRD AVENUE	NEW YORK NY 10017
V	TASHIRO, MASAOKI	100 NORTH RIVERSIDE PLAZA	CHICAGO IL 60606
S	YAMAMOTO, SHIGEO	780 THIRD AVENUE	NEW YORK NY 10017
T	KITAYAMA, HISAYUKI	780 THIRD AVENUE	NEW YORK NY 10017
V	YABU, NAOTO	100 NORTH RIVERSIDE PLAZA	CHICAGO IL 60606
V	KAWAI, NOBORU	100 NORTH RIVERSIDE PLAZA	CHICAGO IL 60606

8. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		9. Name and Address of New Registered Agent Name Street Address (P.O. Box Numbers Not Acceptable) City State FL Zip Code	
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REINSTATEMENT

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 62 11-10-97

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: *Eileen M. Nolan, Asst. Secy* Date: **10/31/97**

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

200002344868-3
 -11/12/97--01084--014
 *** Other fee for intangible tax ***

12. 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 and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. 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: *Shigeo Yamamoto* SHIGEO YAMAMOTO 10/29/97 (212) 418-8300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR20040 (8/97)