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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

06 AUG -8 AM 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000004152

1. Corporation Name

I.R. FIRST FLORIDA, INC.

W06-34717

2. Principal Office Address	3. Mailing Office Address
One Star Farm Road	One Star Farm Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Purchase, New York	City & State: Purchase, New York
Zip: 10577 Country:	Zip: 10577 Country:

REINSTATEMENT 04-06

4. Date Incorporated or Qualified To Do Business in Florida: 11/13/92

5. FEI Number: 133715124 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $6.25 Additional for Certificate

7. Name and Address of Current Registered Agent

Name: United Corporate Services, Inc.

Street Address (P.O. Box Number is Not Acceptable): 9200 South Dadeland Blvd., Suite 508

Suite, Apt. #, etc.: Suite 508

City: Miami State: FL Zip Code: 33156-0000

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: [signature] Date: 7/27/06

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
PTD	Linda Heffner	One Star Farm Road	Purchase, N.Y. 10577
VPS	Roberta Miller	4410 Praire Avenue	Miami, FL. 33140
			700078883507 08/10/06--01040--024 **350.00
			700078883507 08/10/06--01040--025 **100.00

10. 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 contained in Chapter 119, 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: Linda Heffner Linda Heffner, Pres. 7-27-06 212-697-4458

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

See Attached

K. Eckel AUG 09 2006

JUL. 25. 2006 3:08PM

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CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
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Suite, Apt #, etc.	Suite, Apt #, etc.
City & State: Purchase, New York	City & State: Purchase, New York
Zip: 10577 Country:	Zip: 10577 Country:

CR2E081 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida: 11/13/92

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Suite, Apt. #, Etc.: Suite 508

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

3/3

I.R. FIRST FLORIDA, INC.

July 25, 2006

Re: I.R. FIRST FLORIDA, INC.

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir or Madam:

Please be advised, that the above captioned Florida corporation has not received the annual report notices.

We are asking that you waive the reinstatement fee.

Thank you in advance for your cooperation in this matter.

Sincerely,

Linda Reiss Heffner
President

LRH:wp
Enclosure