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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 01 OCT 24 PM 4:57	
DOCUMENT # 093000051325					
1. Corporation Name Renaissance Development Corp. 956 Washington Ave Miami Beach, FL 33139					
2. Principal Office Address		3. Mailing Office Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. Date Incorporated or Qualified To Do Business in Florida 5. FEI Number 05-0424877 6. CERTIFICATE OF STATUS DESIRED ☐ \$875 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent Name Masei, Harim Street Address (P.O. Box Number is Not Acceptable) 956 Washington Ave Suite, Apt. #, Etc. City Miami Beach State FL Zip Code 33139					
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 _____ REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
PP	Masei, Harim I.	956 Washington Ave		Miami Beach, FL 33139	
P	Masei, Khaled S.	956 Washington Ave		Miami, Beach, FL 33139	
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 under section 119.07(3)(D), 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: [Signature] Harim Masei					