

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 MAR 25 PM 2:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P9400000446

1. Corporation Name  
Sea Grace Investments, Inc.

2. Principal Office Address  
2875 N.E. 191 Street

3. Mailing Office Address  
2875 N.E. 191 Street

Suite, Apt. #, etc.  
Penthouse I

Suite, Apt. #, etc.  
Penthouse I

City & State  
Aventura FL.

City & State  
Aventura FL.

Zip  
33180

Country  
USA

Zip  
33180

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida 12/23/93

5. FEI Number 65-045850  
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 Theodore S. Klein

Street Address (P.O. Box Number is Not Acceptable)  
88 N.E. 168 Street

Suite, Apt. #, Etc.

City North Miami Beach

State FL

Zip Code 33162

800005289658-8  
-04/17/02--01053-005  
\*\*\*300.00 \*\*\*300.00

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

REGISTERED AGENT MUST SIGN

Date 3/19/02

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
PD	Erwin Sadni.	2875 NE 191 St. PH2	Aventura FL. 33180
UDS	Isaac Sadni.	2875 NE 191 St. PH2	Aventura FL. 33180

01-02 482 78

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)(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: Erwin Sadni, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 770-0370

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**THEODORE J. KLEIN**  
ATTORNEY AT LAW  
88 N.E. 168TH STREET  
NORTH MIAMI BEACH, FLORIDA 33162

PHONE: (305) 770-0370

FAX: (305) 770-0710

March 19, 2002

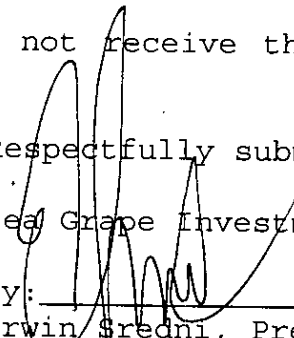
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**RE:** Sea Grape Investments, Inc.

Dear Division of Corporations:

Please be advised that we did not receive the 2001 Annual Report.

Respectfully submitted,  
Sea Grape Investments, Inc.

By:   
Erwin Sredni, President

Date: 3/19/02