

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS		FILED FAX AUDIT NUMBER: H990000850110 99 OCT - 5 PM 12:17	
DOCUMENT # 95000008396 1. Corporation Name CENTERLINE HOMES AT CORAL CREEK, INC.					
Principal Place of Business Mailing Address 334 Lake Crest Court Fort Lauderdale, FL 33326					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable 12198 N.W. 9 AVENUE Suite, Apt. #, etc.		3. New Mailing Address, If Applicable Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 1/31/95	
City & State Coral Springs, FL		City & State		5. FEI Number 65-0625734	
Zip 33071		Zip		Country	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$575 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	2	3	4		
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
D/P/T	Moscovitch, Lewis	334 Lake Crest Court	Fort Lauderdale, FL 33326		
D/VP/S/T	Perry, Craig	334 Lake Crest Court	Fort Lauderdale, FL 33326		
PREPARED BY: <u>Peter English</u> ENGLISH, McCAUGHAN & O'BRYAN, P.A. 100 Northeast Third Avenue Suite 1100 Fort Lauderdale, FL 33301 (305) 462-3500 Florida Bar Number: <u>0144517</u>					
8. Name and Address of Current Registered Agent Cober Corporate Agents, Inc. 2601 South Bayshore Drive 19th Floor Miami, FL 33133			9. Name and Address of New Registered Agent Name EMO CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 100 N.E. Third Avenue, Suite 1100 Suite, Apt. #, Etc.		
City Fort Lauderdale,			State Zip Code FL 33301		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0506, F.S.					
Signature of Registered Agent: <u>Deborah Christy Cost. Sec.</u>		REGISTERED AGENT MUST SIGN		Date: <u>10/15/99</u>	
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver, 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., and that all fees owed by the corporation have been paid. Such information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE FAX AUDIT NUMBER		Lewis Moscovitch, President		10/1/99 (954) 344-8040	
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR H990000850110		Date		Daytime Phone #	

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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Account Number : 076067004147
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CORPORATION REINSTATEMENT
CENTERLINE HOMES AT CORAL CREEK, INC.

Certificate of Status	0
Certified Copy	0
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