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
98 JUN 19 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000013841

1. Corporation Name: JOSEPH'S LANDING INC

Principal Place of Business: 2500 CYPRESS CREEK RD. FT LAUDERDALE FL. 33309

Mailing Address: P.O. BOX 4410 FT LAUDERDALE FL. 33338

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip
Country

3. New Mailing Office Address, If Applicable
P.O. BOX 4410
Suite, Apt. #, etc.
City & State: FTLAUDERDALE FL.
Zip: 33338
Country: BROWARD

4. Date Incorporated or Qualified To Do Business in Florida: 2/4/96

5. FEI Number: 65 0646521
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ **$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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PRES TREAS VICE PRES	ROBERT D. BALLARD	3201 NE 32ND AVE IE FTLAUDERDALE FL 33308	FT LAUDERDALE FL. 33308
SEC.	CATHERINE DURST	3301 NE 57th CT.	FT LAUDERDALE F 33308

100002566961---4
-06/22/98--01002--001
*****8.75 *****8.75

REINSTATEMENT

97-98

SL 6-19-98

8. Name and Address of Current Registered Agent
DAVID GOLDSTEIN
100 SOUTHEAST SECOND ST.
MIAMI 33131
SUITE 2750

9. Name and Address of New Registered Agent
Name: 100002566961---4
-06/22/98--01002--002
****900.00 ****900.00
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City
State: FL
Zip Code

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: [signature]
REGISTERED AGENT MUST SIGN
Date: 6/3/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☒ (See other side for information on 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: Robert D Ballard PRES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 6/2/98
Daytime Phone #: 954 491-7873

CR2E040 (1/98)