

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
05 FEB 11 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000015757**

1. Corporation Name

**S&K REAL ESTATE INVESTMENT, INC.**

2. Principal Office Address

**1323 S.E. 4TH AVE.**

Suite, Apt. #, etc.

3. Mailing Office Address

**(Same)**

Suite, Apt. #, etc.

City & State

**FT. LAUDERDALE, FL**

City & State

Zip

**33316**

Country

**USA**

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

**02/20/1996**

5. FEI Number

**65-0642621**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

**REINSTATEMENT 97-05**

7. Name and Address of Current Registered Agent

Name

**CHARLES KAPLAN**

Street Address (P.O. Box Number is Not Acceptable)

**1323 SE 4TH AVENUE**

Suite, Apt. #, Etc.

City

**FORT LAUDERDALE**

State

**FL**

Zip Code

**33316**

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]*

REGISTERED AGENT MUST SIGN

Date **01/31/2005**

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
Partner	RAAG SINGHAL	1323 SE 4TH AVENUE	FT. LAUDERDALE, FL 33316
			700047634817 03/08/05--01004--003 **1365.00-
			700047634817 03/08/05--01004--004 **585.00
			700047634817 03/08/05--01004--005 **8.75

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:

*[Signature]*

**RAAG SINGHAL 01/31/2005 5270035**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/05)