PLEASE READ	ALL INSTRUCT	IONS BEFORE C	OMPLET	ING THIS FORM.	
APPLICATION FOUNDATION FOUNDATION FOR THE PROPERTY OF THE PROP	FLORIDA DEPAI Sandra I Secreta	RTMENT OF STATE B. Mortham ary of State corporations	ī	FILED	C
DOCUMENT# P9700005558 1. Corporation Name			98 NOV 23 PM 12: 08		
LIZANNE REALTY CORP.			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Business	Mailing Address			,	
23408 MIRABELLA CIRCLE SOUTH BOCA RATON FL 33433 23408 MIRABELLA CIRCLE SOUTH BOCA RATON FL 33433		E SOUTH .			
If above addresses are incorrect in any way, line through incorrect information and enter correction bel 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		01/21/1997 5. FEI Number Applied For		
City & State	City & State				Applicable
Zip Country	Zip	Country	CERTIFICATE	SSTATUS DESIRED For a Certificate	Fee required of Status
		Street Address of Each Officer and/or Director	h r City / State / Zip		
23408 MIS		OB MIRABELLA a Raton F	circles.	Boca Rason, FL 3	3433
P Sid MOSKIN Boca Raton VP Sheldon MASCHLER 7496 Mahoga				Boca Ravon, FL.	33734
			7	00002707547- -12/09/98010740 ****150.00 *****1	
8. Name and Address of Current R	egistered Agent		9, Name and A	Address of New Registered Agent	
Name			688		
MOSKIN, SID 23408 MIRABELLA CIRCLE SOUTH BOCA RATON FL 33433 Suite, Apt. #, E			P.O. Box Number is Not Acceptable)		
City		City	State Zip Code		
10. I, being appointed the registered agent of the above partied corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of					
Registered Agent Date REGISTERED AGENT MUST SIGN					
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No					
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 filling 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 AND TYPED OR PRIN	TED NAME OF SIGNING OFFI	CER OR DIRECTOR		Date Daytime Phone #	_



Lizanne Realty Corp.

23408 Mirabella Circle South • Boca Raton, Florida 33433 • Tel (954) 421-3133

November 19, 1998

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

RE: Document # P97000005558/ I.D. # 65-0720833

To Whom It May Concern:

Enclosed please find the application for reinstatement along with a check in the amount of one hundred and fifty dollars (\$150.00) to replace check number #2180 issued on March 10, 1998. This follows per a conversation of this morning with a gentleman by the name of Andy.

We are sorry for inconvenience this may have caused you and appreciate the time your office took to explain the procedures to follow. We thank you.

Sincerely

Sid Moskin