

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000007169

1. Corporation Name

226 OCEAN DRIVE G.P., INC.

100007734311--8
-09/13/02--01047--023
****900.00 ****900.00REINSTATEMENT 01-02

2. Principal Office Address 1320 S. Dixie Hwy Suite, Apt. #, etc. 781 City & State Coral Gables, FL Zip 33146 Country USA		3. Mailing Office Address 1320 S. Dixie Hwy Suite, Apt. #, etc. 781 City & State Coral Gables, FL Zip 33146 Country USA		4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number 65-0840142				Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐					

7. Name and Address of Current Registered Agent	
Name GARY L. BROWN	
Street Address (P.O. Box Number is Not Acceptable) 4000 Hollywood Boulevard Suite, Apt. #, Etc. 265-S City Hollywood State FL Zip Code 33021	

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 8/20/02

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
Pres	Scott A. Greenwald	1320 S. Dixie Hwy, 781	Coral Gables, FL 33146

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 118.07(3)(g), 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:

SCOTT GREENWALD 8/20/02

C20201 (9/01)