FAX AUDIT NO. H06000293384 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 DEC 12 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT-0506

DOCUMENT # P99000003487

1. Corporation Name

South Pointe Drive Realty, Inc.

2. Principal Office Address	3. Mailing Office Address
111 Alton Road	111 Alton Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Miami Beach, Florida	Miami Beach, Florida
Zip 33139 Country USA	Zip 33139 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 01/13/1999

5. FEI Number: 65-0886087 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee Required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Jack N. Franco

Street Address (P.O. Box Number is Not Acceptable): 111 Alton Road

Suite, Apt. #, Etc.:

City: Miami Beach State: FL Zip Code: 33139

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: _____ Date: 12/12/06

REGISTERED AGENT MUST SIGN

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
PD	Jack N. Franco	111 Alton Road	Miami Beach, FL 33139
D	John M. Lennon	300 S. Pointe Dr. #506	Miami Beach, FL 33139

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 contained in Chapter 119, 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: _____ Jack N. Franco, President 12/12/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Florida Department of State
Division of Corporations
Public Access System

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Account Number : 076103002011
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CORPORATION REINSTATEMENT

SOUTH POINTE DRIVE REALTY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
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