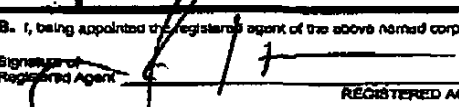


FAX AUDIT NO. H06000293384 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P99000003487			
1. Corporation Name South Pointe Drive Realty, Inc.			
2. Principal Office Address 111 Alton Road		3. Mailing Office Address 111 Alton Road	
Subs. Apt. #, etc.		Subs. Apt. #, etc.	
City & State Miami Beach, Florida		City & State 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. EIN/ID# 65-0886087 Applied For ☐ Not Applicable ☐ 6. CERTIFICATE OF STATUS DESIRED ☐ See 15 And Initial 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			
Subs. Apt. #, Etc.			
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)			
Title	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 the 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: 		Date 12/12/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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Division of Corporations

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Division of Corporations
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From:

Account Name : Berman Rennert Vogel & Mandler, PA
Account Number : 076103002011
Phone : (305) 577-4177
Fax Number : (305) 373-6036

CORPORATION REINSTATEMENT**SOUTH POINTE DRIVE REALTY, INC.**

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