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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000036126

1. Corporation Name
1849 N.W. First Avenue Realty Corp.

REINSTATEMENT 10-07

2. Principal Office Address	3. Mailing Office Address
1849 N.W. First Ave.	1849 N.W. First Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33136 Country: USA	Zip: 33136 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 4/19/99

5. FEI Number: 22-3653712 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
Suite, Apt. #, Etc.:
City: Tallahassee State: FL Zip Code: 32301-2525

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent _____ Date _____
REGISTERED AGENT MUST SIGN

9. Name and Street Address 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
Pres.	Jerry Glatt	215 Coles Street	Jersey City, NJ 07310
Director	Yossi Kozovsash	33 Shoenit, 4th Floor	Tel Aviv Israel 68165
Director	Avishay Levanovsky	215 Coles Street	Jersey City, NJ 07310
Director	Benjamin Schmidt	1512 E. Broward Blvd.	Ft. Lauderdale, Fla. 33301

10. I certify that I am an officer or director of the dissolved or inactive corporation 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 period of reinstatement (check one form so not qualify for an extension 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: X _____ 8/14/03 (201) 798-7100
SIGNATURE AND TYPED OR PRINTED NAME OF INCORPORATOR OR DIRECTOR — Date — Daytime Phone #

jr 8/14

Florida Department of State

Division of Corporations

Public Access System

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To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

SYK

CORPORATION REINSTATEMENT

1849 N.W. FIRST AVENUE REALTY CORP.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$1,200.00