PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUN -5 AM 9:41

DOCUMENT # P99000047381

1. Corporation Name
L + B 100 Military Trail, Inc.

**REINSTATEMENT**
CR2E081 (12/05)

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 17914 LAKE ESTATES Dr. | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. SAME |
| City & State: BOCA RATON | City & State: FL |
| Zip: 33496 Country: PALM BEACH | Zip: Country: |

4. Date Incorporated or Qualified To Do Business in Florida: 5/25/1999

5. FEI Number: 650933009 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $6.25 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: LEONARD CHACKMAN
Street Address (P.O. Box Number is Not Acceptable): 17914 LAKE ESTATES Dr.
Suite, Apt. #, Etc.:
City: BOCA RATON State: FL Zip Code: 33496

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: Leonard Chackman Date: 6/1/06
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 |
|---|---|---|---|
| PRES | LEONARD CHACKMAN | 17914 LAKE ESTATES Dr. | |
| VP | FRANCINE CHACKMAN | (SAME) | BOCA RATON, FL 33496 |
| | | | |
| | | | |
| | | | |
| | | | |

100077140991
07/07/06--01024--021 **450.00

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: Leonard Chackman 6/1/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

M. Williams JUN - 6 2006

*L & B 100 Military Trail, Inc.*

*17914 Lake Estates Drive*
*Boca Raton, Fl. 33496*
*Tel..561-470-5831*
*Fax. 561-470-0323*
*lenardchackman@aol.com*

*Florida Department of State*

*Corporation Reinstatement*

*June 1, 2006*

*Dear Sir:*

*Enclosed is my Corporation Reinstatement application. Also enclosed is my check for $450.00 representing the years 2004, 2005, and 2006. It is respectfully requested that the reinstatement fee be waived in as much as we did not received any of the notices. All notices should be sent to Leonard Chackman, at 17914 Lake Estates Drive, Boca Raton, Florida 33496.*

*Thank you*

*Sincerely,*

Leonard Chackman, President
L & B. 100 Military Trail, Inc.