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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 DEC 22 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000060159

1. Corporation Name

EMD HOLDINGS, INC.

REINSTATEMENT 02-03

2. Principal Office Address	3. Mailing Office Address
c/o Stearns Weaver Miller Weissler et al 200 E. Broward Blvd.	same
Suite, Apt. #, etc.: Suite 1900	Suite, Apt. #, etc.
City & State: Fort Lauderdale, FL	City & State
Zip: 33301 Country: U.S.A.	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 7/01/1999

5. FEI Number: 65-0998937 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ [illegible]

7. Name and Address of Current Registered Agent

Name: Piero L. Desiderio

Street Address (P.O. Box Number is Not Acceptable): c/o Stearns Weaver Miller Weissler et. al.

Suite, Apt. #, Etc.: 200 E. Broward Blvd., Suite 1900

City: Fort Lauderdale State: FL Zip Code: 33301

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: P L Des
REGISTERED AGENT MUST SIGN

Date: 12-22-03

CR2E081 (10/01)

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
P	Piero L. Desiderio	954 Lake Wyman Road	Boca Raton, FL 33431
M	Chuck Desiderio	246 Utah Street	West Palm Beach, FL 33405
S	Lucia D. Meske	935 Algarino Avenue	Coral Gables, FL 33134

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 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: P L Des Piero L. Desiderio 12-22-03 954-462-9540
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
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SYC

CORPORATION REINSTATEMENT

EMD HOLDINGS, INC.

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