APPROVED AND FILED
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06 JUN 12 AM 11:13
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 # P99000062693

REINSTATEMENT 03-06

1. Corporation Name
River Lane Properties Inc.

2. Principal Office Address	3. Mailing Office Address
c/o Loeb Block & Partners	same
Suite, Apt. #, etc.: 505 Park Ave, 9th Floor	Suite, Apt. #, etc.
City & State: New York, NY	City & State
Zip: 10022 / Country: USA	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: July 15 1999

5. FEI Number: 59-3609006 ☐ 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: 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

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: Sarah K. Drake as its agent — Date: 6/12/06
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
	Rebeca Ribas Director/Vice-President	2600 Island Blvd Williams Island	Miami FL 33160
	Marco Bibas Director/President	2600 Island Blvd Williams Island	Miami FL 33160
	Dina Bibas Assistant Secretary	2600 Island Blvd Williams Island	Miami FL 33160
	Leon Bibas Secretary	2600 Island Blvd Williams Island	Miami FL 33160
	Olga Bibas Treasurer	2600 Island Blvd Williams Island	Miami FL 33160
	David Leibman Assistant Treasurer	505 Park Ave	New York, NY 10022

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: David Leibman — June 9th 2006 — 212-755-5510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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6/12 GP

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)558-1575

Heather Chapman x. 2908

CORPORATION REINSTATEMENT

RIVER LANE PROPERTIES INC.

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