

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 MAR 26 PM 12:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 99000067508

1. Corporation Name

SUNMARK PROPERTIES II, INC.

200015279002  
04/03/03--01013--016 \*\*908.75

2. Principal Office Address

800 West Cypress Creek Rd

Suite, Apt. #, etc.

Suite 280

City & State

FT. LAUDERDALE, FL

Zip

33309

Country

USA

3. Mailing Office Address

800 West Cypress Creek Rd

Suite, Apt. #, etc.

Suite 280

City & State

FT. LAUDERDALE

Zip

33309

Country

USA

REINSTATEMENT 02-03

4. Date Incorporated or Qualified  
To Do Business in Florida

JULY 29, 1999

5. FEI Number

65-0936781

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

JAY KRINSKY

Street Address (P.O. Box Number is Not Acceptable)

800 WEST CYPRESS CREEK ROAD

Suite, Apt. #, Etc.

SUITE 280

City

FT. LAUDERDALE

State

FL

Zip Code

33309

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

REGISTERED AGENT MUST SIGN

Date

3/25/03

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/T/D	JAY KRINSKY	6820 S. GRANDE DR.	BOCA RATON, FL 33433
V/S/D	EDWARD J. BOLLOCK	17112 MANDYLHNN CT.	BOCA RATON, FL 33496

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAY KRINSKY, PRESIDENT 3/25/03

Date

Daytime Phone #

954 202-7776

CR2E081 (10/02)

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