May 17 00 02:30p Lazarus Corp Filing 305 220 1440 p.1

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 JUN -2 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000093837

1. Corporation Name
GREYSTONE INVESTMENTS INCORPORATED

2. Principal Office Address	3. Mailing Office Address
5722 S. FLAMINGO RD	
Suite, Apt. #, etc.: # 338	Suite, Apt. #, etc.
City & State: FT. LAUDERDALE, FL	City & State
Zip: 33330 Country: BROWARD	Zip Country

4. Date Incorporated or Qualified To Do Business In Florida: 10/25/1999

5. FEI Number: 65-0959778 ☐ 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: ARTHUR W. ATHANAS

Street Address (P.O. Box Number is Not Acceptable): 5253 SW 118 AVE

Suite, Apt. #, Etc.:

City: COOPER CITY State: FL Zip Code: 33330

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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: _____ Date: 1 JUNE 2000
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	ARTHUR W. ATHANAS	5253 SW 118 AVE	COOPER CITY, FL 33330
VP	RICHARD B. CACERES	61 SW 91ST AVE # 106	PLANTATION, FL 33324
VP	JIM D. LINDSEY	18016 SW 29 ST.	MIRAMAR, FL 33029
SEC	SUSAN LINDSEY	18016 SW 29 ST.	MIRAMAR, FL 33029

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: _____ 1 JUNE 2000 954-450-1334
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #