

PS 1 02

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JAN 24 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S05665

1. Corporation Name

CHANCELLOR SHOPPING CENTER, INC.

2. Principal Office Address

11601 Biscayne Blvd.

Suite, Apt. #, etc.
201

City & State
Miami, FL

Zip
33181

Country
USA

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

04-05

4. Date Incorporated or Qualified
To Do Business in Florida

10/09/1990

5. FEI Number

65-0236446

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

GREENFIELD, Leo

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

11601 Biscayne Blvd. - 201

Suite, Apt. #, Etc.

Suite 201

City

Miami

State

FL

Zip Code

33181

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 1/21/05

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	LEO GREENFIELD	11601 Biscayne Blvd. #201	Miami, FL 33181
VP	BARBARA GREENFIELD	" " "	" " "
SEC	MARIA E.L.MENDOZA	" " "	" " "

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

1/21/05

Date

305.893-9270

Daytime Phone #

CR2E081 (01/05)

93 2 82

CHANCELLOR SHOPPING CENTER, INC.

11601 Biscayne Boulevard - Suite 201
Miami, FL 33181
Telephone 305.893-9270 Fax 305.893-6696

January 21, 2005

Via Federal Express

Offices of the Secretary of State
State of Florida
409 East Gaines Street
Tallahassee, FL 32399

Attention: Reinstatements

Re: CHANCELLOR SHOPPING CENTER, INC.

Gentlemen:

In accordance with your telephone advices to my secretary, and with respect to the above corporation, I enclose the following:

1. **Corporation Reinstatement** Form, requesting reinstatement of Chancellor Shopping Center, Inc. We never received the Annual Report form.
2. **Articles of Amendment to Articles of Incorporation**, amending the name of the corporation to **Chancellor Properties, Inc.;**
3. Check in the amount of \$335.00 covering the cost of reinstatement (\$300.00) and of the amendment (\$35.00).

We would appreciate your expediting the above.

Thank you for your courtesy and cooperation with respect to the above.

Very truly yours,

CHANCELLOR SHOPPING CENTER, INC.


LEO GREENFIELD
President

LG:mc
Enclosures