

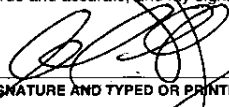


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| CORPORATION REINSTATEMENT 2003-2004 | |  FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS | | FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 04 SEP 14 AM 8:00 | |
|---|-----------------------------------|---|-------------------|--|-------------------|
| DOCUMENT # S 28046 | | | | | |
| 1. Corporation Name CONSOLIDATED YACHT CORPORATION 2051 NW | | | | | |
| 2. Principal Office Address 2051 NW 11 th ST Suite, Apt. #, etc. | | 3. Mailing Office Address 2051 NW 11 th ST. Suite, Apt. #, etc. | | 4. Date Incorporated or Qualified To Do Business in Florida 01/29/1991 | |
| City & State MIAMI, FLORIDA | | City & State MIAMI, FLORIDA | | 5. FEI Number 65-0242347 Applied For Not Applicable | |
| Zip 33125 | Country U.S.A. | Zip 33125 | Country U.S.A. | 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status | |
| 7. Name and Address of Current Registered Agent | | | | | |
| Name ROSS R. HARTOG | | | | | |
| Street Address (P.O. Box Number is Not Acceptable) 9130 South DADELAND BLVD | | | | | |
| Suite, Apt. #, Etc. TWO DALTRAN CENTER, SUITE 1225 | | | | | |
| City MIAMI | | | | State FL | Zip Code 33156 |
| 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 8/18/04 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 | |
| CH. 11 TRUSTEE | ALAN L. GOLDBERG | 111 SW 3 RD STREET #701 | | MIAMI, FL 33130 | |
| | | | | 800041053758 09/14/04--01016--010 **\$900.00 | |
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| 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:  | | ALAN L. GOLDBERG, Trustee | | 305-372-1100 (x13) | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date | | Daytime Phone # | |

CP2E081 (01/04)