PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1996 NOV -1 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT #529323

Titusville One, Inc.
4255 NW 36th Ave.
Miami, FL 33142

2. If Address in Block 1 is incorrect in any way, enter the correct address below:

Address: 3550 North Miami Avenue
City and State: Miami, Florida Zip Code: 33127

3. If Principle Office Address is different from mailing address, enter address below:

Address: Same
City and State: Zip Code:

4. Date Incorporated or Qualified To Do Business in Florida: February 4, 1991

5. FEI Number: 59-3065570

FEI Number Applied For ☐
FEI Number Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	Jacques De Pompignan	3550 North Miami Avenue	Miami, Florida 33127
VSD	Pierre De Agostini	3550 North Miami Avenue	Miami, Florida 33127
TD	Jean Michel Hayot	3550 North Miami Avenue	Miami, Florida 33127

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-11/08/96--01023--026
***375.00 ***375.00

REINSTATEMENT

REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent:

Warner, Johnathan
100 SE 2nd Street
17th Floor
Miami, Florida 33131-1101

9. If changed, new registered agent / office

Name: Kubit, Donald E.
Street Address (Do NOT Use P.O. Box Number): Fowler, White, Burnett, Hurley, Banick & Strickroot, P.A.
Street Address (Do NOT Use P.O. Box Number): 100 S.E. 2nd Street, 17th Floor
City: Miami State: FL Zip: 33131

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Donald E. Kubit REGISTERED AGENT MUST SIGN Date: 10/31/96

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box: ☐ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for explanation on intangible tax.)

13. I certify that I am an officer or director or the registered agent of the corporation and 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 corrected, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. All facts stated on this application are true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Officer or Director: Date: 10/31/1996 Daytime Phone #: (305) 593-5955

Typed or printed name of signing officer or director

Original Page