

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 DEC 26 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # S46166

1. Corporation Name

Window to the Sea, Inc.

2. Principal Office Address

400 S. Pointe Drive

Suite, Apt. #, etc.
#1701

City & State
Miami Beach, Florida

Zip 33139 Country USA

3. Mailing Office Address

c/o Michael J. Liberatore
1401 Brickell Avenue

Suite, Apt. #, etc.
Suite 300

City & State
Miami, Florida

Zip 33131 Country USA

**4. Date Incorporated or Qualified
To Do Business in Florida** 8/7/1996

5. FEI Number 65-0268272

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

Michael J. Liberatore, Esq.

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

1401 Brickell Avenue, Suite 300

Suite, Apt. #, Etc.

Suite 300

City

Miami

State
FL

Zip Code 33131

100009652271
12/24/02 01004 023 \$8.75 0.00

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

Michael J. Liberatore
REGISTERED AGENT MUST SIGN

Date 12-17-02

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
DP	Dantas, Anna Mariae	400 S. Pointe Dr, #1701	Miami Beach, FL 33139
DS	Dantas, Joao Luiz	400 S. Pointe Dr, #1701	Miami Beach, FL 33139
D	Herreros, Camilla	400 S. Pointe Dr, #1701	Miami Beach, FL 33139

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:

Anna Mariae Dantas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-17-02

Daytime Phone #

305-374-0306

12/31

CR2E081 (9/01)