APPLICATION **FOR** REINSTATEMEN

FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS FILED

97 FEB 14 AM 8: 44

Road Instructions on Other Side Before Making Entries Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT # \$84033

GOLDEN NUGGET HOTEL, INC. 18555 Collins Avenue Miami Beach, Florida 33160 2. If Address in Block to incorrect in any way, enter the correct address belok. The NAME of the corporation can be changed only by filing an amendment.

Address

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					Address		****54	<u>31ui</u> N. NN	****540.00	
					-			· ·		
					TEINE	TA	TEMEN	11_9	0-91	
					Zip Code					
Date Incorporated or Qualified 4. FEt Number 10 Do Business in Florida					FEI Number Applie	of For	5 \$8.7	Addition	al Fee required	
10 00 1	10/1/1991 65-02		·' — — — — · · · · · · · · · · · · · · ·				plicable CERTIFICATE OF STATUS DESIRED			
6. Names	and Street Addresses of Each Officer and/	or Director	· <u> </u>							
Title	Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)			City and State				
D	MORALES, GERMAN		18001 Collins Avenue			North Miami Beach, FL				
Ð	.RIASCOS, ALVARO	18555 Collins Avenue			Mia	Miami Beach, FL				
D	SARAMIENTO, GUILLERMO	18555 Collins Avenue			Miam	i Beach,	FL			
D	DE MEDINA, OFELIA	18555 Collins Avenue			Miam	i Beach,	FL			
D	CARO, EDMUNDO	18555 Collins Avenue			Miam	i Beach,	FL			
, D	MEDINA, JESUS 18555 Co.			lins Avenue Miami Bea				, FL		
• ;	REGISTERED AGENT INF				8. Name and Addr	ess of Nev	v Registered Age	nt and/or O	flice	
		Name Cormon Morellog In Man 17-07								
7. Name and Address of Current Registered Agent				German Morales Jr. 407						
Garage Marcal To				18555 Collins Ave.						
German Morales Jr. 18555 Collins Ave.				Street Address (Do NOT Use P.O. Box Number)						
	North Miami Beac		33160.	City and Sta				1 5		
		••		l 1	ne Miami Be	n a h	c	Ζίφ L.	22250	
. I, being	appointed the registered agent of the above	named corpor	ation, am familiar with	and accept II	ne obligations of Sect	ion 607.05	05, F.S.	<u></u>	33160	
ignature of tagistured Agent Date 1/29/97 HEGISTERED RIGENT MUST SIGN										
10. 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.)										
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No See other side for information on intangible lax.)										
2. 1 certify this rei	r that I am an officer or director or the receinstatement application the reason for dissoved by the emporation have been paid. The	ver or trustee e	mpowered to execute	this application	atislies the requirem	ents of sec	xtion 607.0401 o	r 617.0401 .	F.S., and that all	

ypad or printed name of storing officer or directo

Date 1/29/97

Daytime Phone # 305 - 937-1445