

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 MAY 17 PM 2:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V06470

1. Corporation Name

COREN PROPERTIES, INC.

2. Principal Office Address

6510 South Dixie Hwy.

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33405

Country

USA

3. Mailing Office Address

6510 South Dixie Hwy.

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33405

Country

USA

REINSTATEMENT 00-01

**4. Date Incorporated or Qualified
To Do Business in Florida**

January 14, 1992

5. FEI Number

65-0325190

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

Bruce Robert Coren

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

6510 South Dixie Hwy.

Suite, Apt. #, Etc.

City

West Palm Beach

State

FL

Zip Code

33405

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**

Bruce Robert Coren

Date 5-15-01

Bruce Robert Coren

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida non-profit 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, S, T, D	Bruce Robert Coren	6510 South Dixie Hwy.	West Palm Beach, FL 33405

000004242900--1

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

Date

Daytime Phone #

5-15-01 561-722-1153

Pg 2 of 2



ACCOUNT NO. : 072100000032

REFERENCE : 153578 4323109

AUTHORIZATION :

COST LIMIT : \$ 908.75

Patricia Pignatelli

ORDER DATE : May 17, 2001

ORDER TIME : 11:13 AM

ORDER NO. : 153578-005

CUSTOMER NO: 4323109

CUSTOMER: Patrick Johnson, Legal Asst
Edwards & Angell
One North Clematis Street
Suite 400
West Palm Beach, FL 33401

DOMESTIC FILINGS

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2001 MAY 17 PM 1:37

TO BE FORWARDED TO
SUFFICIENCY OF FILING

NAME: COREN PROPERTIES, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Norma Hull

EXAMINER'S INITIALS _____