PLEASE READ ALL INSTRUCTIONS BEFORE CO

FILED
Feb 28 1997 8:00 am
Secretary of State

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V10952

1. Corporation Name

HARRIS PROPERTIES INC.

Principal Place of Business	Mailing Address
303 Gardenia St 3 West Palm Beach, Fl 33401	303 Gardenia 3 West Palm Beach, FL 33401

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
445 SW 2nd St.	P.O. Box 97
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pompano Beach, FL 33060	City & State: West Palm Beach, FL 33402
Zip: 33060 Country:	Zip: 33402-0097 Country: 33402

4. Date Incorporated or Qualified To Do Business in Florida: 02/03/1992

5. FEI Number: 65-0318212 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $6.75 Additional Fee is required for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	Harris,Lamont B.P.	445 SW 2nd St.	Pompano Beach, FL 33060

REINSTATEMENT 96-97

SCC 2-28-97

8. Name and Address of Current Registered Agent

Bright, J. Reeve
110 E. Atlantic Ave.
Suite 400
Delray Beach, Fl 33444

9. Name and Address of New Registered Agent

Name: Harris, Lamont B.P.
Street Address (P.O. Box Number is Not Acceptable): 445 SW 2nd St.
Suite, Apt. #, Etc.:
City: Pompano Beach State: FL Zip Code: 33060

CR2E040 (1/96)

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: Lamont B.P. Harris Date: 02-27-97
REGISTERED AGENT MUST SIGN

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 tax.)

12. 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: Lamont B.P. Harris Lamont B.P. Harris 02-27-97 954-783-5936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Prepared by: Lamont B.P. Harris 445 SW 2nd St. Pompano Beach, 33060 (954) 783 5936

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2/28/97 FLORIDA DIVISION OF CORPORATIONS 12:12 PM
PUBLIC ACCESS SYSTEM
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(((H97000003557 0)))

TO: DIVISION OF CORPORATIONS FAX #: (904)922-4000

FROM: FAS-T CORP. AGENTS, INC. ACCT#: 071001002335
CONTACT: LIDIA FERNANDEZ
PHONE: (305)599-0839 FAX #: (305)716-0346

NAME: HARRIS PROPERTIES INC.
AUDIT NUMBER.....H97000003557
DOC TYPE.....CORPORATION REINSTATEMENT
CERT. OF STATUS..1 PAGES..... 1
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** ENTER 'M' FOR MENU. **