PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED							
CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		03 NOV 24 AM 10: 52			
DOCUMENT # V 53002 1. Corporation Name TAUB PROPERTIES, INC					SECPLIATY OF STATE FALLAFIASSEF, FLORIDA		
(Formerly Developers of old Hyde Park)							
2. Principal Office Address 2905 BAYSHORE BLVD		3. Malling Office Address 2905 BAYSHORE BLVD		REIN	STALLMENT	03	
Suite, Apt. #, etc. SVITE 202		Suite, Apt. #, etc. SUITE 202		4. Date Incorporated or Qualified To Do Business in Florida JULY 24,1992			
TAMPA, FLORIDA			FORIDA	5. FEI Numbe		Applied For	
33629	Country	33629	Country	6. CERTIFICATE		Iditional Fee required Certificate of Status	
7. Name and Address of Current Registered Agent							
BRIAN N. TAUB							
Stre	Street Address (P.O. Box Number is Not Acceptable) 2905 BAYHORE BLVD 000024457080						
Suit	Suite, Apt. #, Etc. SUITE 202				1170570301067003 **150.D0		
City		· · · · · · · · · · · · · · · · · · ·			State Zip Code FL 33629		
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 REGISTERED AGENT MUST SIGN							
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 / Zi	p ·	
DIR B	BRIAN-N. TAUB-1135 ABBEYS		WA4- TAMPA, FL 33602-				
DIR D	EBORAH M.	TAUB 1135	ABBEYS	WAY	TAMPA, FL	33602	
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: Mun 1: Loc 1/- 20-03 (8/3) 832-6444							
SIGNATURE AND PYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #							

TAUB PROPERTIES, INC. 2905 Bayshore Blvd. #202 Tampa, Fl. 33629 (813) 832-6444 Fax (813) 832-6545

October 27, 2003

the same

Department of State
Division of Corporations 409 E. Gaines St.
Tallahassee, Fl. 32399

Re.: Taub Properties, Inc. I.D. # 59-3133653

Dear Madam or Sir,

Because of reasons unknown to us, we failed to receive a 2003 Uniform Business Report regarding the above referenced business entity. Our prior business practice and protocol has always been to file timely Uniform Business Reports. We respectfully request the waiver of any and all penalties due to our inadvertent failure to file 2003 Uniform Business Report.

We have enclosed the requisite fully executed Corporate Reinstatement Form and a check in the sum of One Hundred Fifty dollars (\$150.00) representing payment in full for our annual reporting fee.

Should you have any questions, please contact me at (813) 832-6444.

Sincerely,

Ronald Simor



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 10, 2003

TAUB PROPERTIES, INC. 2905 BAYSHORE BLVD 202 TAMPA, FL 33629 US

SUBJECT: TAUB PROPERTIES, INC.

Ref. Number: V53002

We have received your document for TAUB PROPERTIES, INC. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The annual report/uniform business report/reinstatement application must be signed by an officer or director of the corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 603A00061105