PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham 自[百] FOR Secretary of State REINSTATEMENT . DIVISION OF CORPORATIONS 98 JUL - 1 PH 5: 01 **DOCUMENT # V58120** 1. Corporation Name CHAMPION REALTY ASSOCIATES, INC. Principal Place of Business Mailing Address 900002585559--5 -07/10/98--01083--011 2901 Clint Moore Road Boca Raton, FL 33496 ***1050.00 ***1050.00 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 4. Date Incorporated or Qualified 1515 N. Federal Highway 1515 N. Federal Highway 8/13/92 Suite, Apt. #, etc Suite, Apt. #, etc 5. FEI Number Applied For #107 City & State 65-0418507 Not Applicable Boca Raton, FL Boca Raton, \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED 33432 33432 US 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Name of Officers City / State / Zip Officer and/or Director (Do NOT Use Post Office Box Numbers) Title(s) 1515 N. Federal Hwy. #107 Boca Raton, FL 33432 Pres. Robert A. Banner INSTATEMENT 96-98 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Robert A. Banner Randall L. Jones Street Address (P.O. Box Number is Not Acceptable) 7601 W. Sierra Drive 1515 N. Federal Highway #107 Suite, Apt. #, Etc. Boca Raton, FL Boca Raton bove named corporation, am familiar with and accept the obligations of Section 607.0505, F. stered agent of the REGISTERED AGENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. Yes L.J 12. Logrify 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 filling 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. 6.24-98 561368 1771

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR