

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 JUN 11 AM 6:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F06000006831

1. Corporation Name
ILMA DOV REALTY CORP.

2. Principal Office Address - No P.O. Box #

577 MAYFAIR DR. South

Suite, Apt. #, etc.

City & State

BROOKLYN, N.Y.

Zip

11234

Country

Kings

3. Mailing Office Address

577 MAYFAIR DR.

Suite, Apt. #, etc.

South.

City & State

BROOKLYN N.Y.

Zip

11234

Country

CR2E081 (12/08)

4. Date Incorporated or Qualified To Do Business in Florida

10/16/06

5. FEI Number

11-3574775

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

ILYA BYKHOVSKY

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

2861 LEONARD DRIVE

Suite, Apt. #, Etc.

F 309

City

AVENTURA

State

FL

Zip Code

33160

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

ILYA BYKHOVSKY

REGISTERED AGENT MUST SIGN

Date **6-03-09**

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 / Zip
P.	ILYA BYKHOVSKY	577 MAYFAIR DR. South	BROOKLYN, N.Y. 11234

500157042785
06/11/09--01055--009 **458.75

REINSTATEMENT

RH

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 contained in Chapter 119, 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:

ILYA BYKHOVSKY - ILYA BYKHOVSKY

Date

6-3-09

Daytime Phone #

(718)

813-4202