

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 NOV -5 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717900

1. Corporation Name

River Reach, Incorporated

949 River Reach Drive
949 River Reach Drive

2. Principal Office Address

949 River Reach Drive

Suite, Apt. #, etc.

3. Mailing Office Address

949 River Reach Drive

Suite, Apt. #, etc.

City & State

Fort Lauderdale, Florida

City & State

Fort Lauderdale, Florida

Zip

33315

Country

USA

Zip

33315

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 1/15/1970

5. FEI Number

591321098

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

Shendell

Name

Tamar Duffner *Shendell*, Esq.

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

3650 N Federal Highway

Suite, Apt. #, Etc.

202

City

Lighthouse Point

State

FL

Zip Code

33064

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

[Signature]

Date November 8, 2004

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 / Zip
P	Carl Miller	1201 River Reach Drive #304	Fort Lauderdale, FL 33315
VP	Ralph Caruso	1301 River Reach Drive #417	Fort Lauderdale, FL 33315
S	Eugene Sweeney	900 River Reach Drive, #423	Fort Lauderdale, FL 33315
T	John Pryor	1350 River Reach Drive #505	Fort Lauderdale, FL 33315
D	John Brooks	1301 River Reach Drive #409	Fort Lauderdale, FL 33315
D	Joshua Greenberg	900 River Reach Drive #416	Fort Lauderdale, FL 33315

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)(l), 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:

Ralph Caruso
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/08/2004

Date

954-781-3747

Daytime Phone #

Ralph Caruso

CR2E081 (01/04)