

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED

97 DEC -3 AM 9:07

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **L51030**

1. Corporation Name
RAI SYSTEMS NETWORK, INC.

Principal Place of Business Mailing Address

**3001 ROCKY POINT DR EAST
 SUITE 340
 TAMPA FL 33607**

**3001 ROCKY POINT DR EAST
 SUITE 340
 TAMPA FL 33607**



REINSTATEMENT 97/00

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

Suite, Apt. #, etc. Suite, Apt. #, etc.

3121 TIMBERLEE RD. **3121 TIMBERLEE RD.**

City & State City & State

WIMAUMA, FL **WIMAUMA, FL**

Zip Country Zip Country

33598 **USA** **33598** **USA**

4. Date Incorporated or Qualified To Do Business in Florida **02/19/1990**

5. FEI Number Applied For

59-2993246 Not Applicable

6. CERTIFICATE OF STATUS DESIRED **\$8.75 Additional Fee 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PSD	MYSKA, LANNY N.	3001 N ROCKY PT DR E 340	TAMPA FL 33607
D	FARDAIS, LOUISE M	3001 N ROCKY PT DR E 340	TAMPA FL 33607
D	MUELLER, KARL	178 SPRINGFIELD RD	OTTAWA, ONTARIO, CANA
D	GYMULEWICH, HENRY J.	8001 N ROCKY POINT DR E, #340	TAMPA FL
D	LETZEISEN, ROBERT B.	3001 N ROCKY POINT DR E, #340	TAMPA FL

8. Name and Address of Current Registered Agent

MYSKA, LANNY
3001 N ROCKY PT DR E
SUITE 340
TAMPA FL 33607

3121 TIMBERLEE RD.
WIMAUMA, FL
33598

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc. **800002366258--0**

City **-12/08/97--01141--027**
******758.75** ******758.75**
FL **FL**

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: *Lanny N. Myska* Date: **OCT. 24/97**

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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: *Lanny N. Myska* **LANNY N. MYSKA, PRES IDENT 10/24/97 813-288-8808** **633-8460**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/97)