

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

1997 MAY 30 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **NO9204**

1. Corporation Name

Road Knights of South Florida, Inc.

Principal Place of Business

Mailing Address

1906 N Dixie Hwy
Hollywood, FL 33020

12301 NW 23rd Ct
Plantation, FL
33323

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 To Do Business in Florida

5-9-85

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2674588

Applied For

Not Applicable

City & State

City & State

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

Zip

Country

Zip

Country

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D/P	Weber, Howard	12301 NW 23rd Ct	Plantation, FL 33323
DVP	Rudd, Daniel	27560 Lanyard St.	Boca Raton, FL 33428
D	Kushner, Alvin	2159 NW 63rd Ave.	Margate, FL 33363
D	Cottrell, Mary	412 NW 20th St.	Wilton Manors, FL 33311
D	Frech, Ralph	191 SW 66th Ct	FT Lauderdale, FL 33307

8. Name and Address of Current Registered Agent

Howard Weber
1906 N Dixie Hwy
Hollywood, FL 33020

9. Name and Address of New Registered Agent

Name: **HOWARD S. WEBER**
Street Address (P.O. Box Number is Not Applicable): **12301 NW 23rd Ct**
Suite, Apt. #, Etc.: *******1.25 *****1.25**
City: _____ State: **FL** Zip Code: _____

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

Howard Weber

REGISTERED AGENT MUST SIGN

Date

5/26/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No

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:

Howard S. Weber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
HOWARD S. WEBER

Date

5/26/97

Daytime Phone #

(954) 922-0126

CPRE040 (12/96)