PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING FORM. , FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham FOR CILOPA Secretary of State REINSTATEMENT 1997 SEP -4 AN 10: 48 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE. FLORIDA DOCUMENT # 551614 1. Corporation Name **ROYAL INVESTMENT & DEVELOPMENT CORPORATION** Principal Place of Business Mailing Address 1901 S FEDERAL HMY 1991 8 PEDERAL HWY **SOVINTON BOH-FL 90495** SOYNTON BCH FL 33435 000002286270---03/05/97--01113--013 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 4. Date Incorporated or Colombia 23.75 ****323.75
To Do Business in Florida 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 1535 Prosperity Farms Ro 1535 Prosperity 11/21/1977 Sulte, Apt. #, etc 5. FEI Number Applied For 59-1877233 Not Applicable \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED 70° 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) Name of Officers Street Address of Each Officer and/or Director
(Do NOT Use Post Office Box Numbers) Title(s) and/or Directors City / State / Zip PD RAICH, NICHOLAS S., SR. 1901 S FEDERAL HWY-BOYNTON BOH FL *3140*7 S RAICH, SHARON <u> 33403</u> VT RAICH, ANTHONY ۷ RAICH, NICHOLAS S., JR. RAICH, MICHAEL P. 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent RAICH, NICHOLAS S., SR. 1901 S FEDERAL HWY **BOYNTON BCH FL 33435** City Zip Code KePark 10. I, being appointed the register named conforation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Date 3.10.97 Registered Agen REGISTERED AGENT MUST SIGN 11. Does this corporation pay any intangible tax to the (See other side for information on intangible tax.) Dept. of Revenue under S. 199.032, Florida Statutes. Yes 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: U

Anthony Raich 2/12/97 561-842-4777