

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB -8 AM 10:39

DOCUMENT # L05869

1. Corporation Name

RI-BLACK ENTERPRISE, INC

REINSTATEMENT 04-06

2. Principal Office Address

4920 NW 181ST TERR.

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

Zip
33055

Country
USA

3. Mailing Office Address

1708 NW 69TH TERR

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

Zip
33147

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/28/1989

5. FEL Number

65-0133434

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

01/19/05 01047001 \$150.00
CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

ROOSEVELT IVORY

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

1708 NW 69TH TERRACE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33147

000045029440

01/19/05 01047 001 **150.00

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

Roosevelt Ivory

REGISTERED AGENT MUST SIGN

Date

02/07/2006

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
PVT	ROOSEVELT IVORY	1708 NW 69TH TERR	MIAMI FLORIDA 33147

000045029440

02/14/06 01016 014 **300.00

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:

Roosevelt Ivory

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

02/07/2006

Daytime Phone #

DOMINIQUE MARTIN LEROY

A PROFESSIONAL ASSOCIATION
ALFRED I. DUPONT BLDG. SUITE 1428-29
169 EAST FLAGLER STREET
MIAMI, FLORIDA 33131
(305) 373-4227 FAX (305) 373-1958

February 7, 2006

Division of Corporations
c/o Mr. Gary Blankenbaker
2661 Executive Center Circle
Tallahassee, Florida 32301

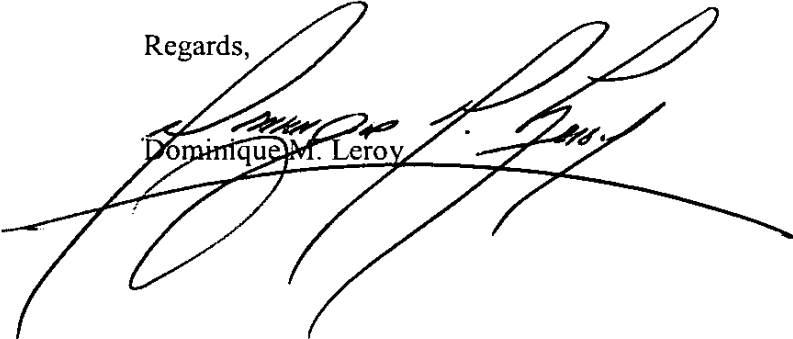
Via Overnight

Re: RI-Black Enterprise, Inc
L05869

This letter is to serve as a reminder that the above referenced taxpayer never received His annual report for the year ending 2004 and 2005. The address on file has been amended. We ask that the file is corrected, enclosed please the check in the amount of Three hundred Dollars.

If you have any questions, please contact me at 305-373-4227 or 785-543-0999

Regards,


Dominique M. Leroy