

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

05 JAN 14 AM 9:08

SECRETARY  
TALLAHASSEE, FL

DOCUMENT # **ND2000004628**

**1. Corporation Name**

**THE HOUSE OF RIZPAH, INC.**

**2. Principal Office Address**

**12550 BEACONTREE WAY**

Suite, Apt. #, etc.

City & State

**ORLANDO, FLORIDA**

Zip

**32837**

Country

**ORANGE**

**3. Mailing Office Address**

**12550 BEACONTREE WAY**

Suite, Apt. #, etc.

City & State

**ORLANDO, FLORIDA**

Zip

**32837**

Country

**ORANGE**

12/27/04 01023 002 78.50  
03-05

**4. Date Incorporated or Qualified  
To Do Business in Florida**

**JUNE 17, 2002**

**5. FEI Number**

**20-1992060**

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**

Name

**MARJORIE BEATTY**

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

**12550 BEACONTREE WAY**

Suite, Apt. #, Etc.

City

**ORLANDO**

State

**FL**

Zip Code

**32837**

800045483528  
01/27/05--01018--011 \*\*8.75

**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

**MARJORIE BEATTY**

Date

**1-5-05**

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
PRESIDENT	MARJORIE BEATTY	12550 BEACONTREE WAY	ORLANDO, FL 32837
VICE- PRESIDENT	CRYSTAL BEATTY	12550 BEACONTREE WAY	ORLANDO, FL 32837
SEC/ TRES.	TIONA BEATTY	12550 BEACONTREE WAY	ORLANDO, FL 32837
			800045483528 01/27/05--01018--009 **219.00
			800045483528 01/27/05 01018 010 **61.25

**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)(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:**

**MARJORIE BEATTY / MARJORIE BEATTY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**1-5-04 1407/816**

Daytime Phone # **1469**

CR2E081 (01/04)