	PLĘASE RI	EAD ALL INST	<b>TRUCTIONS</b>	BEFORE (	COMPLET	ING THIS FORM	
APPLICÂTION FOR Jim Smith Secretary of State DIVISION OF CORPORATIONS					FILED		
DOCUMENT # P0000116913  1. Corporation Name					02 NOV -5 AM 9: 07		
RB AND RG ENTERPRISES, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Business Mailing Address					<del></del>		
7880 SW 161 PLACE MIAMI FL 33193		7880 SW 161	7880 SW 161 PLACE MIAMI FL 33193				
			iling Office Address, If Applicable			orated or Qualified ness in Florida	2/21/2000
Suite, Apt. City & State		Suite, Apt. #,	Suite, Apt. #, etc.  City & State		5. FEI Numbe	<del></del>	Applied For
Zip	Country	Zip	Countr	у	6. CERTIFICATE	OF STATUS DESIRED   S8	75 Additional Fee required for a Certificate of Status
7. Names	and Street Addresses of Each Offi		rida nonprofit corpora	ations must list at lea	ast 3 directors)		
Title(s) Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip	
PVD	BENITEZ, ROLANDO	7880 SW 161 PLACE			MIAMI FL 33193		
TD	GARCIA, RUBEN	7880 SW 161 PLACE			MIAMI FL 33193		
SD	SIMON, OLGA	7880 SW 161 PLACE			MIAMI FL 33193		
					90 11709	00008810° /0201094008	799 **150.00
8. Name and Address of Current Registered Agent Name					9. Name and A	Address of New Registered	Agent
GARCIA, RUBEN 7880 SW 161 PLACE MIAMI FL 33193				Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.			
0. I, being	appointed the registered agent of	the above named corpo	ration, am familiar wi	th and accept the ob	oligations of Section		5, F.S.
Signature of Registered A	Agent July 1		REQU	IRED		Date 11/1/200	2
	<u> </u>	REGISTERED AGE	ENT MUST SIGN			′ /	

11. 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

11/1/02 (31/3) 28+0-30/ Date Daytime Phone # CR2E040 (8/02)

## RB & RG ENTERPRISES, INC. 7880 SW 161 Place Miami, FL 33193

November 1, 2002

To: Department of State Division of Corporations

Please note that we did not receive any prior notice for renewal. Enclosed is renewal check and form.

Thank You

Kuben Garcia Treasurer

RB & RG Enterprises, Inc