


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

1093

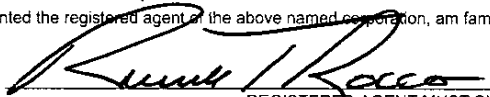
06 JAN -3 PM 12:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

500061826175  
12/01/05--01028--009 \*\*600.00  
500061826175  
01/12/06--01003--019 \*\*150.00  
REINSTATEMENT 02-06

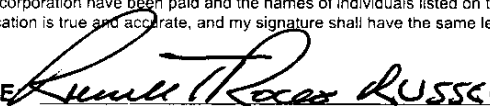
<b>CORPORATION REINSTATEMENT</b> 		<b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <b>P01000088661</b>			
1. Corporation Name <b>RT Rock Enterprises, Inc.</b>			
2. Principal Office Address Suite, Apt. #, etc. <b>256 SW BRENTWOOD WAY</b> City & State <b>Lake City, FL</b> Zip <b>FL 32024</b>		3. Mailing Office Address <b>P.O. Box 2242</b> Suite, Apt. #, etc. City & State <b>Lake City, FL</b> Zip <b>32056</b>	
Country <b>USA</b>		Country <b>USA</b>	

4. Date Incorporated or Qualified To Do Business in Florida <b>Sep. 10, 2001</b>	
5. FEI Number <b>59-3756582</b>	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name <b>Russell T. Rocco</b>		
Street Address (P.O. Box Number is Not Acceptable) <b>256 SW BRENTWOOD WAY</b>		
Suite, Apt. #, Etc.		
City <b>Lake City</b>	State <b>FL</b>	Zip Code <b>32024</b>

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 	Date <b>11/28/05</b>
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
P.	Russell T Rocco	256 SW BRENTWOOD WAY	Lake City, FL 32024

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 	RUSSELL T. ROCCO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date <b>11/28/05</b>	Daytime Phone # <b>755-2350</b>

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December 23, 2005

Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

Re: Reinstatement for R T Rock Enterprises, Inc  
Doc # P01000088661

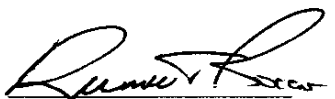
Dear Sirs,

On Oct 4, 2002 this corporation was administratively dissolved. The Post Office returned the notices you had sent. We did not realize this till now.

Our original letter on November 30 had the wrong administratively dissolved date. This letter is a correction. Also your letter returned the reinstatement form in order to correct this. You also require an additional \$150.00 to cover fees for the year 2006.

Enclosed you will find the reinstatement form and an additional \$150.00.

Thank You



Russell T Rocco President

P O Box 2242  
Lake City, FL 32056

Phone 386-755-2350

ATTACHMENTS: ① R T ROCK DECEMBER 23 NEW LETTER WITH 150<sup>00</sup> CHECK  
② FLORIDA DEPT OF STATE LETTER DATED DECEMBER 1, 2005  
③ REINSTATEMENT FORM  
④ R T ROCK ORIGINAL NOVEMBER 30, 2005 LETTER

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(FOR REFERENCE ONLY)

November 30, 2005

Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

Re: Reinstatement for R T Rock Enterprises  
Doc # P01000088661

Dear Sirs,

On Oct 10, 2004 this corporation was administratively dissolved. I called on November 28 and found out that the post office had returned the notices you had sent. We did not realize this until now.

We are sorry this happened and have the correct address on the reinstatement form.

Enclosed is the check for reinstatement as discussed on November 28.

Thank you for your help.

Sincerely,

  
Darrell Nickelson Accountant  
P O Box 3763  
Lake City, FL 32056

Phone 386-961-8283  
Fax 386-755-1487  
Email rnickelson@se.rr.com