


# 2006 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P03000014877</b> 1. Entity Name <b>RECRUITING ASSOCIATES INTERNATIONAL, INC.</b>			
Principal Place of Business <b>3350 SW 148TH AVENUE STE. 110 MIRAMAR, FL 33027</b>		Mailing Address <b>3350 SW 148TH AVENUE STE. 110 MIRAMAR, FL 33027</b>	
2. Principal Place of Business <b>1560 Sawgrass Corp. Pkwy. Suite, Apt. #, etc. 4th Flr.</b>		3. Mailing Address <b>1560 Sawgrass Corp. Pkwy. Suite, Apt. #, etc. 4th Flr.</b>	
City & State <b>Sunrise, FL</b>		City & State <b>Sunrise, FL</b>	
Zip <b>33331</b>	Country <b>U.S.A.</b>	Zip <b>33331</b>	Country <b>U.S.A.</b>
4. FEI Number <b>51-0444603</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>RIGAL, ANA V 3350 SW 148TH AVENUE STE. 110 MIRAMAR, FL 33027</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <u><i>Ana Vuxon Rigal-Yppuendo</i></u> DATE <u>1-23-06</u> <small>Signature, typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$300.00</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P RIGAL, ANA V 3350 SW 148TH AVENUE, STE. 110 MIRAMAR, FL 33027</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Ana Vuxon Rigal-Yppuendo</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>1-23-06</u> Daytime Phone # <u>954-815-4691</u>	

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