

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 FEB 20 AM 9:28

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P03000136249

1. Corporation Name

RichGan Installation Corporation

REINSTATEMENT 07-09

CR2E081 (12/08)

002/24

2. Principal Office Address - No P.O. Box # 3333 Turtle Cove		3. Mailing Office Address 3333 Turtle Cove	
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A	
City & State West Palm Beach		City & State West Palm Beach	
Zip 33411	Country USA	Zip 33411	Country USA

4. Date Incorporated or Qualified To Do Business in Florida 11/20/03	
5. FEI Number 200411295	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Richard Ganesh		
Street Address (P.O. Box Number is Not Acceptable) 3333 Turtle Cove		
Suite, Apt. #, Etc. N/A		
City West Palm Beach	State FL	Zip Code 33411

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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 Richard Ganesh
REGISTERED AGENT MUST SIGN

Date 02/17/2009

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	Richard Ganesh	3333 Turtle Cove	West Palm Beach, FL 33411

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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:

Richard Ganesh

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-09

Date

561-294-9931

Daytime Phone #