

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 APR 18 PM 12:10

DOCUMENT # **PD3000147651**

1. Corporation Name

**Alumni Investments, Inc.**

**700098018727**  
04/23/07--01047--004 \*\*600.00

**REINSTATEMENT**

04-07

2. Principal Office Address

**7750 N.W. 42nd Street**

Suite, Apt. #, etc.

3. Mailing Office Address

**SAME**

Suite, Apt. #, etc.

City & State

**Hollywood, FL**

City & State

Zip

**33024**

Country

**U.S.A**

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

**12/08/03**

5. FEI Number

☒ Applied For  
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**7. Name and Address of Current Registered Agent**

Name

**Michael Ross**

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

**7750 N.W. 42nd Street**

Suite, Apt. #, Etc.

City

**Hollywood**

State

**FL**

Zip Code

**33024**

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

*Michael Ross*

REGISTERED AGENT MUST SIGN

Date

**4/17/07**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip  |
|--------|--------------------------------------|---|---------------------|
| PVS    | Michael Ross                         | 7750 N.W. 42nd Street                             | Hollywood, FL 33024 |
|        |                                      |   |                     |
|        |                                      |   |                     |
|        |                                      |   |                     |
|        |                                      |   |                     |
|        |                                      |   |                     |

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:

*Michael Ross*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**4/17/07**

Daytime Phone #

2 of 2

Department of State  
Division of Corporations

Re: Document No. *PO3000147651*

*4/17/07*

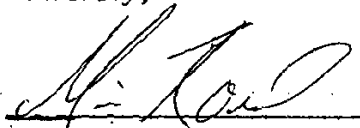
To whom it may concern,

I, *Michael Ross*, president of *Alumni Investments, INC.*

am writing this letter to ask you to accept my payment for the *2004, 2005,*  
*2006, 2007* annual report of the above mentioned corporation.

The reason of the delay is that I never received the report and since  
it is the first time I am in a corporation I did not know I was  
supposed to send it before May 1st. I just found out about it.  
Please accept my apology and my payment.

Sincerely,

  
\_\_\_\_\_  
*Michael Ross*  
PRESIDENT