PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	CORPORATION FLORIDA DEPARTMENT OF STATE Secretary of State						FILED		
KEII	A9 IMI EIA	IENI	DIVISION OF COR			RATIONS		2007 OCT 19 AM 10: 12	
DOCUMENT # P04000038414 1. Corporation Name						SECRETARY OF STATE TALLAHASSEE, FLORID			
Regency Club, Inc						DEIAICTATEMENT DS-07			
2. Principal Office Address - No P.O. Box # 751 Park of Commerce Drive			3. Mailing Office Address Same				REINSTATEMENT DO CR2E081 (1/07)		
Suite, Apl. #, etc. Suite 128			Suite, Apt. #, etc.					reporated or Qualified 04/2004	
City & Siste Boca Raton, FL			City & State				5 1-080	7877 Applied For	
²⁴ 9 3348		Country USA	Złp		Coun	itry	6.	Not Applicable \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent								La Commente of Smitts	
Bீaritz and Colman, LLP								e reinstatement fee is imposed, except in umstances which the entity did not receive	
1075 Broken Sound Parkway, NW						the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
Suite 102									
Boca				State	33487	100 NO TRAITOU.			
8. 1, 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 10/18/07 REGISTERED AGENT MUST SIGN									
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)									
Tides	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			r r	City / State / Zip	
Pre/Tres	Martin Pechter			751 Park of Commerce Drive, #128			orive, #128	Boca Raton, FL 33487	
VP/Sec	Lisa Pechter			751 Park of Commerce Drive, #128			Orlve, #128	Boca Raton, FL 33487	
VP	Jack Pechter			751 Park of Commerce Drive, #12			Drive, #128	Boca Raton, FL 33487	
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		10			10	600111016016 /19/0701055020 **458.75			
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 807 or 817, F.S. I further certify that when filling 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: Martin Pichten, Pros 101/07 Sc1-982-1170 Signature and Typed or Printed Name of Signing Officer or Director Date Daystine Phone & V219									

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