

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P05000051966

1. Corporation Name

Rand Griffith Enterprise

2. Principal Office Address - No P.O. Box #

10859 Cory Lake Dr

Suite, Apt. #, etc.

3. Mailing Office Address

10859 Cory Lake Dr.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33647

Country

U.S.A

Zip

33647

Country

U.S.A

7. Name and Address of Current Registered Agent

Name

RETS GRIFFITH

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

10859 Cory Lake Drive

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33647

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

REGISTERED AGENT MUST SIGN

Date

10/24/08

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
CEO	RETS GRIFFITH	10859 CORY LAKE DR	TAMPA, FL 33647

800137427648

10/24/08 01033 010 **450.00

10/29

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/24/08

Date

813-334-8946

Daytime Phone #

FILED

08 OCT 29 PM 4:58

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 06-08

CR2E081 (10/08)