


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		<b>APPROVED AND FILED</b>  96 DEC 31 PM 3:12  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P93000006928 1 Corporation Name  RSPL, INC.					
Principal Place of Business 13710 Southwest 56 Street Building K Miami, FL 33175 US			Mailing Address 13710 Southwest 56 Street Building K Miami, FL 33175 US		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2 New Principal Office Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip		3 New Mailing Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip		4 Date Incorporated or Qualified To Do Business in Florida 01/28/1993  5. FEI Number 16-1360075 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
Country		Country		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
D	Silverman, Robert	3201 North Federal Highway	Fort Lauderdale, FL 33306		
D	Kramer, Bruce	3201 North Federal Highway	Fort Lauderdale, FL 33306		
D	Sandler, Robert	3201 North Federal Highway	Fort Lauderdale, FL 33306		
D	Lawson, Edward	3201 North Federal Highway	Fort Lauderdale, FL 33306		
<b>REINSTATEMENT 1996</b>					
8. Name and Address of Current Registered Agent  Silverman, Robert 3201 North Federal Highway Fort Lauderdale, FL 33306			9. Name and Address of New Registered Agent Name <u>A. Alan</u> Street Address (P.O. Box Number is Not Acceptable) <u>12/31/96</u> Suite, Apt. #, Etc. City <u>300002045489--9</u> <u>-01/03/97</u> <u>12/19/96</u> <u>003</u> <u>****375.00</u> <u>****375.00</u>		
10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent <u>[Signature]</u> Date <u>12/30/96</u> REGISTERED AGENT MUST SIGN					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)					
12 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: <u>[Signature]</u> <u>Robert A. Sandler</u> <u>12/30/96</u> <u>(954) 564-4300</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

CR2E040 (12/95)