PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 20 AM 10:37

DOCUMENT # P93000075312

1. Corporation Name
RSC Development, Inc.

REINSTATEMENT 02-06

CR2E081 (12/05)

2. Principal Office Address	3. Mailing Office Address
c/o Pollack + Rosen, P.A. 800 Douglas Road	14101 Dickens Avenue
Suite, Apt. #, etc. North Tower, Suite 450	Suite, Apt. #, etc.
City & State Coral Gables, Florida	City & State Sherman Oaks, California
Zip 33134 Country U.S.A.	Zip 91423 Country U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida 10/28/1993

5. FEI Number 650445572 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Mark. E. Pollack

Street Address (P.O. Box Number is Not Acceptable): 800 Douglas Road

Suite, Apt. #, Etc.: North Tower, Suite 450

City: Coral Gables State: FL Zip Code: 33134

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 _____ Date 2/27/06
REGISTERED AGENT MUST SIGN

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	Ronald S. Chase	14101 Dickens Avenue	Sherman Oaks, CA 91423
VP-S-T	Sid Wingerhoff	14101 Dickens Avenue	Sherman Oaks, CA 91423
		100069443901 04/04/06--01054--005 **1350.00	
		100069443901 04/04/06--01054--006 **8.75	

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 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: Ronald S. Chase By Sidney Wingerhoff VicePres POA 2/23/06 818 990 7168
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #