PLEASE BEAD	ALL INSTRUCTION	S BEFORE C	OMECETI	IÑG THIS FÜRM.		
APPLICATION FOR	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State		APPROVED AND FILED			
REINSTATEMENT	DIVISION OF CORPORATIONS		98 NOV 23 PM 2:51			
DOCUMENT # P95000070634 1. Corporation Name			ł			
RHA ASSOCIATES, INC.		SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business	Mailing Address	<u>_</u>			_	
· · · · · · · · · · · · · · · · · · ·					00	
Suite 325 Boca Raton, FL 33431	25 con, FL 33431			REINSTATEMENT 2		
If above addresses are incorrect in any way, line thro		er correction below.				
2. New Principal Office Address, If Applicable 2/01 (or porofe blud)	rate Blud. 7101 Corporate Blud		Date Incorporated or Qualified To Do Business in Florida 09/13/95			
Suite, Apt. #, etc./ Suits 325 Ciby& State	Suite, Apt.#, etc. / Suite 335	771	5. FEI Number Applied For			
Zip Country	Koca Kusun	+1	6.	\$8.75	Not Applicable Additional Fee required	
7. Names and Street Addresses of Each Officer and/o	or Director (Florida nongrofit coroc	orations must list at lea		OF STATUS DESIRED [for	a Certificate of Status	
Name of Officers Stre Title(s) and/or Directors Officers		Street Address of Each Officer and/or Director Use Post Office Box N	<u> </u>	City / Stat	e / Zip	
2	Suite 3	25				
P/D Robert Kaufman	rporate B	Lvd.	Boca Raton,	FL 33431		
D Andrew Astrove M.D. 2101 Corpute Blod. Boca Katow, FL 3343					FL 3343/	
VPD HArvey Plosker M.D 30176		rporate Bi	lud.	Boca Rator,	F1 33431	
		/				
	 	0000027039304 -12/04/9801112006			3304 112-006	
				****750.00	****750.00	
8. Name and Address of Current R	enistered Agent		9 Name and A	ddress of New Registered Ag	ent	
	Name	Nome				
STEVEN SERLE, P.A. 2101 CORPORATE BLVI	Street Address (P.	Street Address (P.O. Box Number is Not Acceptable) Suite Act # Ftc				
SUITE 325 BOCA RATON, FL 3343	Suite, Apt. #, Etc.					
		City	ligations of Santia	State FL	Zip Code	
10. I, being appointed the registered agent of the above Signature of	e name corporation, and familiar v	with and accept the ob-	agations or Section		. 1998	
steven serie	SISTERED AGENT MUST SIGN			Date 7000 70		
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No No (Seed Personal Property tax due June 30.)						
12. 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 under section 119.07(3)(i), 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: Robert Kaufman, President 1/10/98 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DESIDENT DAYS DAYS DAYS PHONE #						