

PLEASE READ ALL INSTRUCTIONS REFORE COMPLETING THIS FORM

		FLEASE NEAD /	ALL INSTRUCT	IIONS BEFORE	COMPLETIN	NG THIS FU	FILED	
CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS			OO MAY 10 AM 8: 5 SECRETARY OF STATE TALEARASSEE, FLORID			
	JMENT ation Name	Г# Р970000195	i04' - '					ointild.
Re	c Devel	lopment, Inc.			Committee of the Commit			
2								
2. Principal Office Address 1500 N. Federal Highway			3. Mailing Office Address 1500 N. Federal Highway		DEINS.	TATEM	FNT (	X)(7
Suite, Apt. #, etc. Suite 202			Suite, Apt. #. etc. Suite 202		4. Date Incorpor. To Do Busine	rated or Qualified		
City & State Ft. Lauderdale, FL			City & State Ft. Lauderdale, FL		<b>5.</b> FEI Number 59–34355		03/03/9	Applied For Not Applicable
Zip Country 33304 USA		1 '	Zip 33304	Country USA	6. CERTISICATE OF STATUS DESIDED 58.			tional Fee required tificate of Status
			7. Name and /	Address of Current Register	ered Agent	<del></del>		
1	<u> </u>	Richard E. Cook	60	C000032599262 -05/13/0001103019				
	Sucei Maa	dress (P.O. Box Number is No 1500 N. Federal		****900.	[][] 東东宋::	*30 <b>0.</b> 68		
• • • -	Suite, Apt	Suite 202		√				
	City	Ft. Lauderdale			State Zip Code 3333	)4		
<b>B.</b> I, being Signature o Registered	f 🚣	whard I	ve named corporation am f	familiar with and accept the o	obligations of section	,	03, F.S.	
9. Names	and Street A	ddresses of Each Officer and	d/or Director (Florida nonpre	ofit corporations must list at le	east 3 directors)			Control of September 1911 1
Titles		Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip		
P,S T,S,	Richa	ard E. Cook		1500 N. Federal Highway Suite 202		Ft. Lauderda	ale, FL	33304

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 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 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.

Richard E. Cook

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR