

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF REVENUE
 Catherine H. Hanft
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

00 MAR -7 PM 12:17
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P97000083230**
 1. Corporation Name
RODGERS INVESTMENTS CORP

Principal Place of Business
 1361 NE 27TH WAY
 POMPANO BEACH FL 33062
 US

Mailing Address
 3000 NE 30TH PL
 STE 400
 FT LAUD FL 33306
 US

Chg



SP

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 09/25/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0784001	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	RODGERS, KENNETH SR	#2 CARDINAL DR	WARREN NJ 07059
D	RODGERS, KENNETH JR	2631 NE 5 ST	POMPANO BCH FL 33062

000003169560--4
 03/14/00 01107 000
 ****300.00 ****300.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
SHOEMAKER, RICHARD L 2050 E OAKLAND PARK BLVD #202 FT LAUDERDALE FL 33306-1121		Name Shoemaker Richard L. CPA Street Address (P.O. Box Number is Not Acceptable) 612 NE 26 ST Suite, Apt. #, Etc. City Wilton Manors State FL Zip Code 33305	

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 Richard L. Shoemaker Date 2-14-2000
 REGISTERED AGENT MUST SIGN

11. 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: [Signature] 3.3.00 954.565.1008
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/99)



RMG

Rodgers Management Group, Inc. 2


The Intracoastal Building
3000 N.E. 30th Place, Suite 400
Fort Lauderdale, FL 33306
Office 954-565-1008
Fax 954-565-8364

3.3.00

Dear officer,

ON 2.14.2000 I WAS MADE AWARE THAT OUR CORP WAS DISSOLVED BY MY ACCOUNTANT. I CALLED THE CORP DIV AND ASKED STACEY ~~PRATHER~~ ABOUT THE CORP. SHE INDICATED THE ADDRESS WAS WRONG AND ASK ME TO WRITE A LETTER ASKING TO BE REINSTATED, ASK TO WAIVE THE LATE FEES BECAUSE OF THE ABSENCE OF NOTICE DUE TO THE MAIL. PLEASE REINSTATE THIS CORP. AND WAIVE THE FEES (LATE). THE CORRECTED ADDRESS IS ON THE APPLICATION. IT IS 3000 NE 30th PLACE INSTEAD OF 300 NE 30th PLACE. PLEASE FIND CHECK ENCLOSED FOR \$300.

Thanks,


Ken Rodgers