

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 2004 8:00 A.M.
Secretary of State

DOCUMENT # P98000001086

1. Corporation Name

RDI at Tampa Bay, Inc.

2. Principal Office Address

Post Office Box 340010

3. Mailing Office Address

Post Office Box 340010

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33694

Country

Zip

33694

Country

4. Date Incorporated or Qualified

To Do Business in Florida 01/06/1998

5. FEI Number

59-3492101

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

Steven Singer

Street Address (P.O. Box Number is Not Acceptable)

16105 Dawnview Drive

Suite, Apt. #, Etc.

City

Tampa

State
FL

Zip Code
33624

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

Steven Singer
REGISTERED AGENT MUST SIGN

Date

4/28/2004

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	Steven Singer	16105 Dawn View Drive	Tampa, FL 33624
V	Pamela Simmons	16105 Dawn View Drive	Tampa, FL 33624

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 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:

Steven Singer / Steven Singer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/2004
Date

813-269-7379
Daytime Phone

CR2E081 (01/04)