

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 SEP 28 AM 10:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000102926

1. Corporation Name
RBS INDUSTRIES, INC.

5212 NW 67TH AVENUE
LAUDERHILL, FL 33319

2. Principal Office Address
5212 NW 67TH AVENUE

3. Mailing Office Address
LAUDERHILL, FL 33319

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
LAUDERHILL, FLORIDA

City & State
LAUDERHILL, FLORIDA

Zip Country
33319 USA

Zip Country
33319 USA

4. Date Incorporated or Qualified
To Do Business in Florida 12/10/1998

5. FEI Number
650881080

Applied For
 Not Applicable

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

REINSTATEMENT 03-04

7. Name and Address of Current Registered Agent

Name
LEONARD W. TURNLEY

Street Address (P.O. Box Number is Not Acceptable)
5212 NW 67TH AVENUE

Suite, Apt. #, Etc.

City
LAUDERHILL

State Zip Code
FL 33319

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 Leonard W. Turnley
REGISTERED AGENT MUST SIGN

Date 9/24/04

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
PRES	LEONARD W. TURNLEY	5212 NW 67TH AVENUE	LAUDERHILL, FLORIDA 33319

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: Leonard W. Turnley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 9/24/04 Daytime Phone # 954-746-7922

CFR081 (01/04)