

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P99000104577 1. Entity Name R J ALLIANCE, INC.						FILED 07 MAY -1 PM 3:03 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 3100 NE 48TH ST STE 917 FT LAUDERDALE, FL 33308				Mailing Address 3100 NE 48TH ST STE 917 FT LAUDERDALE, FL 33308			
2. Principal Place of Business - No P.O. Box # 7820 Exeter Blvd. E.				3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State Tamarac, FL				City & State			
Zip 33321		Country USA		Zip		Country	
4. FEI Number 65-0979861				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
RANDEE J GOLDER PA 10026 LEXINGTON CIRCLE NORTH BOYNTON BEACH, FL 33436				Name Barry Golder Street Address (P.O. Box Number is Not Acceptable) 7820 Exeter Blvd. E. City Tamarac			
State FL				Zip Code 33321			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE <u><i>Barry Golder</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <u>4/23/07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUNCO, JAMIE 3100 NE 48TH ST STE 917 FT LAUDERDALE, FL 33308	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7820 Exeter Blvd. E. Tamarac, FL 33321	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUNCO, RICHARD 3100 NE 48TH ST STE 917 FT LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AP 5/9	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOLDER, BARRY 7820 EXETER BLVD. E. TAMARAC, FL 33321	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900103235839 05/25/07--01006--017 **300.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GOLDER, EVELYN 7820 EXETER BLVD., E. TAMARAC, FL 33321	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <u><i>Barry Golder</i></u> <u>4/23/07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Barry Golder <small>Date</small> <small>Daytime Phone #</small>							