PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION OF FOR QUE REINSTATEMENT

FLORIDA DEPARTMENT OF STATE:

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #617076

FILED

RDJ INTERNATIONAL, INC.			98 MAY -5 PM 1: 08 DECKLIARY OF STATE	
Principal Place in Business	Malling Address		TÄLLÄHASSEE	, FĽÓŔĺĎA
fact elatoresses are nobrect nany way in 1 New Point of DMod Address i Abd dad ele 9766 SW 168th Street Suite Follows: Situal State Miami FL Zp 33157 Country Dade	3 New Mairing Office Address	. If Applicacie 4. Cate In To Do 5 FEI Nu 6.	ncorporated or Qualified Business in Florida imber 5-050142	Applied For Not Applicable \$8.75 Additional Fee required for a Certificate of Status
7 Names and Street Addresses of Each Officer	and or Director (Florida nonprofit corp	orations must ast at least 3 director	s)	
Title(s) Name of Officers and or Orectors	i	Street Address of Each Officer and or Director Use Post Office Box Numbers)	City	State Zip
PST Jaundoo, Rudolp	h 16211 s	W 99th Court	Miami, FL	33157
		REINST	TATEMENT	20 2896 p8
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent		
		Name Rudolpho Jaundoo Street Address (P.O. Box Number is Not Acceptable) 1.6211 SW 99th Court Suite, Apl. 4. Etc.		
		City Miami	F	ate Zip Code L 33157
10. I. being appointed the registered agent of the Bignature of Registered Agent	ABOVE Named corporation, am familiar ABCOV AEGISTERED AGENT MUST SIGN	•	Date	>8 <i>1</i> 38
11. This corporation owes or Intangible Personal Prop	has paid the current ye			side for information tangible tax.)
12. I certify that I am an officer or director or the rethis reinstatement application, the reason for dowed by the corporation have been paid and toon this application is true and accurate, and my	issolution has been eliminated, the corp he names of individuals listed on this fo	porate name satisfies the requirement from do not qualify for an exemption	ents of section 607,0401 or 617	.0401, F.S., that all fees

SIGNATURE:

Accold Co. Dece Cos.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

18786/4

Daytime Phone #