


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 AUG 27 PM 3:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V24469

1. Corporation Name  
THE REFRESHMENT GROUP INC

2. Principal Office Address <u>6011 RODMAN ST</u> Suite, Apt. #, etc. <u># 101</u> City & State <u>HOLLYWOOD, FL</u> Zip <u>33023</u> Country <u>USA</u>		3. Mailing Office Address <u>6011 RODMAN ST</u> Suite, Apt. #, etc. <u># 101</u> City & State <u>HOLLYWOOD, FL</u> Zip <u>33023</u> Country <u>USA</u>	
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4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number  
650325053

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

Applied For  
Not Applicable

REINSTATEMENT W-03

7. Name and Address of Current Registered Agent

Name WILLIAM TELFORD 900022612629

Street Address (P.O. Box Number is Not Acceptable)  
6011 RODMAN ST 08/27/03--01053--007 \*\*8.75

Suite, Apt. #, Etc.  
# 101 900022612629

City HOLLYWOOD State FL Zip Code 33023

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 W Telford Date 8/21/03

REGISTERED AGENT MUST SIGN

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
PRESIDENT	WILLIAM TELFORD	6011 RODMAN ST, # 101	HOLLYWOOD, FL 33023
			<u>900022612629</u> <u>08/27/03--01053--005 **500.00</u>
			<u>900022612629</u> <u>08/27/03--01053--005 **200.00</u>
			<u>900022612629</u> <u>08/27/03--01053--008 **8.75</u>

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: W Telford Date 8/21/03 Daytime Phone # (954) 480 2640

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/01)