

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM *page 1 of 2*

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P02000106437**

1. Corporation Name

SOUTHEAST REGIONAL DEVELOPMENT GROUP, INC.

Principal Place of Business

Mailing Address

~~6860 NW 46TH CT.
LAUDERHILL FL 33319~~

~~6860 NW 46TH CT.
LAUDERHILL FL 33319~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

2510 NW 19th Street

2510 NW 19th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 1A

Suite 1A

City & State

City & State

Ft. Lauderdale, FL

Ft. Lauderdale, FL

Zip

Zip

33311

33311

Country

Country

USA

USA

4. Date Incorporated or Qualified
To Do Business in Florida

10/02/2002

5. FEI Number

Applied For

48-1285986

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DPT	VAN RILES, SHELDON	6860 NW 46TH CT.	LAUDERHILL FL 33319
VSD	O RILES, JOHNNIE	6860 NW 46TH CT.	LAUDERHILL FL 33319
<i>PVS</i> <i>TD</i>	<i>O Riles, Johnnie</i>	<i>6860 NW 46th CT</i>	<i>Lauderhill, FL 33319</i>

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~TURNER, OTHEL~~
~~6860 NW 46TH CT.~~
~~LAUDERHILL FL 33319~~

Name

Turner, Othel

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

2510 NW 19th Street

Suite, Apt. #, Etc.

Suite 1A

City

Ft. Lauderdale

State

FL

Zip Code

33311

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11/25/03

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/25/03

CR2E040 (7/03)

OTHEL TURNER & CO.

ACCOUNTANTS
5787 WEST SUNNYSIDE BOULEVARD * HUMANA PLAZA
PLANTATION, FLORIDA 33313
(954) 583-2205 FAX: (954) 321-0532

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November 26th, 2003

Division of Corporations

Annual Report Section

P.O. Box 1500

Tallahassee, Fl. 32302-1500

RE: SOUTHEAST REGIONAL DEVELOPMENT GROUP, INC
DOCUMENT # P02000106437

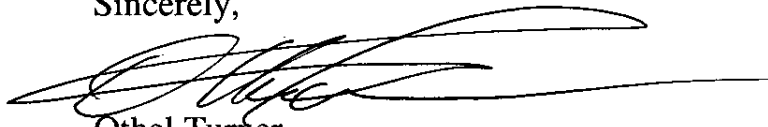
This letter is written as a request for abatement of the \$400.00 late fee due to reasonable cause, as requested by your office.

The taxpayer had a change in address and never received your original notice.

Herewith enclosed is a Check in the amount of \$150.00 for Southeast Regional Development Inc.

Please file accordingly and abate the late fee.

Sincerely,



Othel Turner
For Johnnie O Riles