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

FILED
04 JAN 14 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 1A	Suite, Apt. #, etc.: Suite 1A
City & State: Ft. Lauderdale, FL	City & State: Ft. Lauderdale, FL
Zip: 33311 Country: USA	Zip: 33311 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 10/02/2002

5. FEI Number: 48-1285986 ☐ Applied For ☐ 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~~ PRT	~~O RILES, JOHNNIE~~	~~6860 NW 46TH CT.~~	~~LAUDERHILL FL 33319~~
PVS TD	O Riles, Johnnie	6860 NW 46th CT	Lauderhill, FL 33319

000025168130
12/02/03--01063--014 **150.00
000025168130
01/29/04--01028--017 **150.

8. Name and Address of Current Registered Agent

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

9. Name and Address of New Registered Agent

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

CR2E040 (7/03)

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 _____ Date 11/25/03
REGISTERED AGENT MUST SIGN

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: _____ 11/25/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

OTHEL TURNER & CO.
ACCOUNTANTS
5787 WEST SUNRISE BOULEVARD • HUMANA PLAZA
PLANTATION, FLORIDA 33313
(954) 583-2205 FAX: (954) 321-0532

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