

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT #

N33019

1. Corporation Name

BROWARD COUNTY HISPANIC BAR ASSOCIATION, INC.

Principal Place of Business

Mailing Address **Same**

**International Bldg., Penthouse East
 2455 E. Sunrise Blvd.
 Ft. Lauderdale, FL 33304**

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

2. New Principal Office Address, if Applicable
See above.

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

June 27, 1989

5. FEI Number

15-0264190

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

SR 7-1 (12/98)

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P / D	Soraya Hevia Kasper	Penthouse East 2455 E. Sunrise Blvd.	Ft. Lauderdale, FL 33304
V/D	Carlton A. Bober	203-N Justice Bldg. 524 S. Andrews Avenue	Ft. Lauderdale, FL 33301
T / D	Jennifer Shaw	Suite 301 1401 N. University Dr.	Coral Springs, FL 33071
S / D	Alex Arreaza	Suite 217 800 W. Oakland Park Blvd.	Wilton Manors, FL 33311
D	Vivian Miller	Suite 208 3650 N. Federal Hwy.	Lighthouse Pt. FL 33064
D	Georgette Sosa Douglass	320 SE 9 Street	Ft. Lauderdale, FL 33316

8. Name and Address of Current Registered Agent

**Vivian Miller
 2691 E. Oakland Park Blvd.
 Suite 303
 Ft. Lauderdale, FL 33306**

9. Name and Address of New Registered Agent

Name **Soraya Hevia Kasper**
 Street Address (P.O. Box Number is Not Acceptable)
2455 E. Sunrise Blvd. 3059615--4
 Suite, Apt. #, Etc. **-12/03/99--01017--001**
 City **Penthouse East** State **FL** Zip Code **33304**
Fort Lauderdale

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.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date **October 21, 1999**

11. This corporation owes the current year Intangible Personal Property Tax due June 30.

Yes No

(See other side for information on intangible tax.)

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)(l), 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:

SORAYA HEVIA KASPER

10/21/99

954-561-2230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

99 NOV 22 PM 4:53

**SECRETARY OF STATE
 TALLAHASSEE, FLORIDA**

REINSTATEMENT 99

ITS

CR2001 (12/98)

ADDITIONAL SHEET

Section 7 Continued:

Title	Name of Officer/Director	Street Address	City/ State/ Zip
D	Mark J. LaBate	Suite 300 800 SE 3 Ave.	Ft. Lauderdale, FL 33316
D	Catherine M. Rodriguez	8 th Floor 633 S. Federal Hwy.	Ft. Lauderdale, FL 33301
S/D	Rae E. Chorowski	Suite 503 600 S. Andrews Ave.	Ft. Lauderdale, FL 33301