

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 731706

Corporation Name

THE AMERICAN FOUNDATION FOR THE ARTS, INCORPORATED

Principal Place of Business

314 N.E. MIAMI COURT
C/O RICHARD LEVINE
MIAMI FL 33137

Mailing Address

3814 N.E. MIAMI COURT
C/O RICHARD LEVINE
MIAMI FL 33137



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

1. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

12/31/1974

5. FEI Number

51-0166808

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)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
S	LEVINE, MAE	11 ISLAND AVE.	MIAMI BEACH FL
D	MALLORY, RONALD	3814 NE MIAMI COURT	MIAMI FL
PT	LEVINE, RICHARD	1 GROVE ISLE DR #1610	MIAMI FL
D	CALDERIN, JOSE	1254 SW 18TH STREET	MIAMI FL
D	GUILLEN, FEDERICO	4161 POINCIANA AVE	MIAMI FL

100004744871--B

-12/31/01--01056--001

*****61.25 *****61.25

8. Name and Address of Current Registered Agent

LEVINE, RICHARD
3814 N.E. MIAMI COURT
MIAMI FL 33137

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

SIGNATURE REQUIRED

Date

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)(f), 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: Richard Levine

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GARY N. FEDER, CPA, P.A.
CERTIFIED PUBLIC ACCOUNTANT

(305) 667-7100

Post Office Box 249177
Coral Gables, Florida
33124-9177

Reinstatements Section telephone: (850) 245-6059, telefax: (850) 245-6017
Attn: Barbara Mitchell
DIVISION OF CORPORATIONS
Florida Department of State
PO Box 6327
Tallahassee, FL 32314-6327

*Re: The American Foundation for the Arts, Incorporated
Document # 731706 ~ Annual Report - 2001*

Dear Ms. Mitchell and Whomever Else May Be Of Assistance:

Thanks for taking the time to review this matter with me, this morning.

As discussed, the Foundation's Principal Director advises that, apparently, the pre-printed 2001 Uniform Business Report forms were not received and has enclosed the executed Application for Reinstatement with this request to waive, abate and/or without charging the otherwise assessable delinquency and reinstatement fees.

(Please note my office did not receive blank forms I recall requesting early in 2001.)

Please grant request and reinstate retroactively without lapse or additional expense.

Thanks for your consideration.

Most Sincerely,

Gary N. Feder

Gary N. Feder, President
GARY N. FEDER, CPA, P.A.

December 19, 2001

enclosures:

- 2001 Application for Reinstatement - Uniform Business Report
- \$61.25 check payable to Department of State

Acknowledged By:

Richard Levine

Richard Levine, Principal Director