PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **STAPPLICATION** Katherine Harris FILEU SELRETARY OF STATE VICTOR OF COPPORATIONS **FOR** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 725075 DOCUMENT # 99 OCT 25 PH 5: 36 1. Corporation Name HIALEAH LODGE NO 1074, LOYAL ORDER OF MOOSE INC Principal Place of Business Malling Address 305 E 32ND ST 305 E 32ND ST HIALEAH FL 33013 HIALEAH FL 33013-3214 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 12/18/1972 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 59-0621925 Not Applicable \$8.75. Additional Fee required Zip Country Zip Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) <del>11/03/93--01003--0</del>01 Name of Officers and/or Directors Street Address of Each Officer and/or Director \*\*\*\*236.25 State ## 236.25 Title(s) LARGEN, RAYMOND E 13237 SW 43RD LANE MAMI FL 33175 CANERO, RAYMOND P 610 W 64TH DRIVE HIALEAH FL 33101 RANDOLPH, ROBER 5701 100 67711 07., AFT 210 650 E. 65 5 MIAMI FL 33100 RYSAK, Emil 33013 TALKAH 861 S ROYAL PUNCHANGE BEVE MIAMI, FL 5.W. 12 TERR 2872 BLEAST 49PD STREET P.O. BOX 1451 HMEAH FL 22018 HIALE ALL ROBERTS <del>OTD</del> FLEISHER, LAWRENCE \$ 560 EAST 53 ST HIALEAH FL 33013 P/D 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent LEXIS DOCUMENT SERVICES INC. 3953 WW KELLEY ROAD TALLAHASSEE FL 32301 10. I, being appoint ed corporation, am familiar with and accep of Section 607,0505, F.S. Signature of Age Date \_//

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 filling 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.

EGISTE D AGENT MUST SIGN

SIGNATUR