

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**CORPORATION
REINSTATEMENT**



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

APPROVED
AND
FILED

00 MAR 17 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **731114**

1. Corporation Name

METATHERAPY INSTITUTE, INC.

200003195822--4

-04/04/00--01093--010

****306.25 ****306.25

2. Principal Office Address

27940 South Dixie Highway

Suite, Apt. #, etc.

3. Mailing Office Address

27940 South Dixie Highway

Suite, Apt. #, etc.

City & State

Naranja, Florida

Zip

33032

Country

U. S. A.

City & State

Naranja, Florida

Zip

33032

Country

U. S. A.

4. Date Incorporated or Qualified
To Do Business in Florida

11/14/1974

5. FEI Number

23-7400277

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Steven C. Simon

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

27940 South Dixie Highway

Suite, Apt. #, Etc.

City

Naranja

State
FL

Zip Code

33032

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Steven C. Simon

REGISTERED AGENT MUST SIGN

Date

3/14/00

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

* See Attached for additional names.

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Executive Director	Steven C. Simon	27940 South Dixie Highway	Naranja, FL 33032
C/D	William Walker, Jr.	FNB of Homestead 1550 N. Krome Ave.	Homestead, FL 33030
S/D	Eliza Perry	Councilwoman, City of Homestead 425 N.W. 16th St.	Homestead, FL 33030
VC/D	Curt Ivy	City Manager, City of Homestead 790 N. Homestead Blvd.	Homestead, FL 33030
T/D	Denise Mihal	Homestead Hospital 160 N.W. 13th St.	Homestead, FL 33030
D	Al Rolle	Police Chief, City of Homestead 4 S. Homestead Ave.	Homestead, FL 33030

10. 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:

Steven C. Simon

Executive Director, Steve Simon

(305) 247-1949

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/99)

Attachment
2082

Block 9, additional name:

Title	Name	Address
D	Alan Sonnabend	General Manager, Sonesta Beach Resort 300 Atlantic Rd. Key Biscayne, Florida 33149