

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JAN -5 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 752474

1. Corporation Name

Greater Miami Ski Club

2. Principal Office Address

1780 NW 94th Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

11385 SW 32nd Street

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33172

Country

United States of America

Zip

33165

Country

United States of America

4. Date Incorporated or Qualified
To Do Business in Florida

05/14/1980

5. FEI Number

650060231

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 05-07
CR2E081 (12/05)

100083397301
01/05/07--01043--003 **358.75

7. Name and Address of Current Registered Agent

Name

Rachel Ferradaz

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

11385 SW 32nd Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33165

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

Rachel Ferradaz
REGISTERED AGENT MUST SIGN

Date 12/26/2006

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Lou Thomas	159 East Enid Drive	Key Biscayne, FL 33149
VD	Tom DeChristopher	15500 Gauntlet Hall Manor	Davie, FL 33331
SD	Dennis Longo	12960 Lerida Street	Miami, FL 33156
TD	Rachel Ferradaz	11385 SW 32nd Street	Miami, FL 33165

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 contained in Chapter 119, 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:

Rachel Ferradaz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RACHEL FERRADAZ

12/26/06

3054369200
Date Daytime Phone #