

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 MAY 21 PM 2:17

DOCUMENT #

M99865

1. Corporation Name:

BETTER FAMILIES THROUGH TAE KWON DO, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

5754 BIND ROAD  
MIAMI, FL. 33155

5754 BIND ROAD  
MIAMI, FL. 33155

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

2. New Principal Office Address, If Applicable

N/A

3. New Mailing Office Address, If Applicable

N/A

4. Date Incorporated or Qualified  
To Do Business in Florida

SEPT. 22, 1988

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0071571

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PRES.	MARY BETH KLOCK - PEREZ	7150 SW 62 STREET	MIAMI, FL. 33143
VICE PRES.	DIEGO PEREZ	7150 SW 62 STREET	MIAMI, FL. 33143
			400002537004--6 -05/27/98--01087--006 ***1050.00 ***1050.00
			REINSTATEMENT 96-98
			TS 5/22

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DIEGO PEREZ  
5754 BIND ROAD  
MIAMI, FL. 33155

Name

DIEGO PEREZ

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

5754 BIND ROAD

Suite, Apt. #, Etc.

City

MIAMI

State  
FL

Zip Code  
33155

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 5/14/98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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:

MARY BETH K. PEREZ  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARY BETH K. PEREZ

305-663-1882

Date

Daytime Phone #