

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
Mar 01, 2002 8:00 A.M.
Secretary of State

DOCUMENT # *N00000006923*

1. Corporation Name

The Next Generation of Future Leaders, Inc.

2. Principal Office Address

780 N.E. 199th St

Suite, Apt. #, etc.

E/102

City & State

North Miami Beach, FL

Zip

33179

Country

Dade

3. Mailing Office Address

780 N.E. 199 St

Suite, Apt. #, etc.

E/102

City & State

North Miami Beach, FL

Zip

33179

Country

Dade

REINSTATEMENT *2001-2002*

**4. Date Incorporated or Qualified
To Do Business in Florida**

Sept. 2000

5. FEI Number

65-1047719

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

**\$375 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

Vincent M^c Daniel

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

780 N.E. 199 St

Suite, Apt. #, Etc.

E/102

City

North Miami Beach

State

FL

Zip Code

33179

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

Vincent M^c Daniel

REGISTERED AGENT MUST SIGN

Date *2-26-02*

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
P/O/F	Vincent M ^c Daniel	780 N.E. 199 St E/102	North Miami Beach, FL 33179
V/P/Ds	Willie S. Thompson	780 N.E. 199 St E/102	North Miami Beach, FL 33179
T/D	Darryl K. Baxter	780 N.E. 199 St E/102	North Miami Beach, FL 33179

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:

Vincent M^c Daniel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-26-02

Date

(305) 493-2392

Daytime Phone #

CR2E081 (9/01)