

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 APR -1 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # NO1006002867

1. Corporation Name

Acts of Kindness For Kids, Inc.

2. Principal Office Address

1055 S. Congress Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

1055 S. Congress Avenue

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip 33406

Country

USA

City & State

West Palm Beach, FL

Zip 33406

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

4/23/01

5. FEI Number

20-2586804 (Provisional)

☒ 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

Michael J. Welte

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

1055 S. Congress Avenue

Suite, Apt. #, Etc.

City

West Palm Beach

State

FL

Zip Code

33406

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

M. J. Welte

REGISTERED AGENT MUST SIGN

Date

3/30/05

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
C	Michael J. Welte	12328 ARENDA DRIVE	Wellington, FL 33414
T	Abbie L. Kohl	8604 S Southgate Shores	Tamarac, FL 33321
S	Natalie Pickrell	16355 E Derby Dr.	Loxahatchee FL 33470

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:

M. J. Welte

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/30/05

Daytime Phone #

561-649-7123

CR2E081 (01/05)