

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 FEB -6 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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02/11/03--01044--003 **122.50

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # NO10000007080			
1. Corporation Name Together We Can, Inc.			
2. Principal Office Address 633 ne 167st. Suite, Apt. #, etc. Suite 318 City & State North Miami Beach FL Zip 33162		3. Mailing Office Address 633 ne 167 ST. Suite, Apt. #, etc. suite : 318 City & State North Miami Beach FL Zip 33162	

4. Date Incorporated or Qualified To Do Business in Florida 10/04/01		Applied For ☒
5. FEI Number 65-1147828		Not Applicable ☐
6. CERTIFICATE OF STATUS DESIRED ☐ \$0.75 Additional Fee required for a Certificate of Status		

7. Name and Address of Current Registered Agent		
Name Virginia Harris-EL		
Street Address (P.O. Box Number is Not Acceptable) 2200 nw. 120st.		
Suite, Apt. #, Etc.		
City Miami	State FL	Zip Code 33167

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 Virginia Harris-EL REGISTERED AGENT MUST SIGN	Date 2/4/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Tanet Robinson	2200 nw. 120st.	Miami, FL 33167
VP/D	Lorris Robinson	2200 nw. 120st.	Miami, FL 33167
CFO/D	Virginia Harris-EL	2200 nw. 120st.	Miami, FL 33167
DO	Michael Guerrier	2200 nw. 120st.	Miami, FL 33167
CIO/D	Wade Jones	1831 NW 186 St	Miami, FL 33056
D	John Muhammad	9751 sw 1168st.	Miami, FL 33157

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: Virginia Harris-EL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date: 2/4/03 Daytime Phone #: 305-953-9638

2/26/03

TOGETHER WE CAN, INC
N01000015481

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

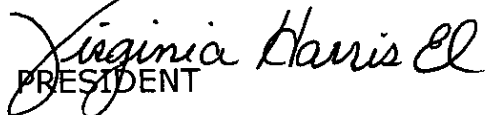
TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2002
UNIFORM BUSINESS REPORT. I HAVE CHANGED MY PRINCIPAL OR MAILING
ADDRESS SINCE I INCORPORATED.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS
ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY,


PRESIDENT