## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE  Jim Smith  Secretary of State  DIVISION OF CORPORATIONS	FILED  O2 NOV 15 AM 9:00
DOCUMENT # NO/00  1. Corporation Name	0008362	SEGRETARY OF STATE TAELAHASSEE, FLORIDA
H.Y.P.E. OUTREA	TCH CAREER	IAELAHASSEE, FLURIDA
EDUCATION CENTE	PR, INC	
2425 N. HIAWASSEE NA	7. U. Box 68/988 Suite, Apt. #, etc.	ac/1/22
City & State	City & State	4. Date Incorporated or Qualified To Do Business in Florida 26 Nov 2001
ORTANDO FL- 1	DRIANDO FL	5. FEI Number Applied For Not Applied For Not Applicable
32818 ORANGE	32868 ORANGE	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
Name and Address of Current Registered Agent		
Name Paul A	KENE	
Street Address (P.O. Box Number is Not A	cceptable)	000009019830
2425 N.	HIAWASSEE KD	11/15/0201034004 **280.00
Suite, Apt. #, Etc.		
City ORLANDO		State Zip Code <b>FL</b> 32818
8. I, being appointed the registered agent of the above names composition, an familia with and accept the obligations of section 607.0505 or 617.0503, F.S.		
Signature of	VIIII RAY	
Registered AgentREGIS	STÉRED AGENT MUST SIGN	Date 7 Nov 2002
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
NI		st 3 directors)
Titles Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P PAUL A. KENE	E 2425 N. HIHWMSEE	BOOKS OR/ANDO FL 328/8
V-P TARDIEU - KIDOR	26-2900 WOODBRID	GE IN ORLANDO FL 32808
VP MARIE KENT	c 2425 HIAWASSE	2- Pld ORLANDO F-C 32818
T GUERLINE RIDO,	RE 2900 WOOSBEN	DEE WORLANDO FI 32XDG
VP GARRY THEODATE	2425 HIAWASSE	ERI ORLANDO FL 32818
<u> </u>	11	
10. I certify that I am an officer or director or the receiver or trustee empoweled 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 flames of individuals listed on this application is true and accurate, and my signature shall have the legal effect as if made under oath.		
SIGNATURE:	SAME OF SIGNING OFFICER OR DIRECTOR	7 Nov 2002  Date Daytime Phone #