23425

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 NOV 15 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000008362

1. Corporation Name
H.Y.P.E. OUTREACH CAREER EDUCATION CENTER, INC

2. Principal Office Address	3. Mailing Office Address
2425 N. HIAWASSEE Rd	P.O. BOX 681988
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO FL	City & State: ORLANDO FL
Zip: 32818 Country: ORANGE	Zip: 32868 Country: ORANGE

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4. Date Incorporated or Qualified To Do Business in Florida: 26 Nov 2001

5. FEI Number: 010-55-3225 ☐ 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: PAUL A. RENE

Street Address (P.O. Box Number is Not Acceptable): 2425 N. HIAWASSEE RD

000090198830
11/15/02--01094--004 **280.00

Suite, Apt. #, Etc.:

City: ORLANDO State: FL Zip Code: 32818

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 _____ Date 7 Nov 2002
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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	PAUL A. RENE	2425 N. HIAWASSEE Rd 32818	ORLANDO FL 32818
V-P	TARDIEU RIDORE	2900 WOODBRIDGE LN	ORLANDO FL 32808
VP	MARIE RENE	2425 HIAWASSEE Rd	ORLANDO FL 32818
T	GUERLINE RIDORE	2900 WOODBRIDGE LN	ORLANDO FL 32808
VP	GARRY THEODATE	2425 HIAWASSEE Rd	ORLANDO FL 32818

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: _____ 7 Nov 2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #