

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 JUL -7 PM 3:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N-02000003397**

1. Corporation Name

ALBERT LEROY MOSS FOUNDATION, INC.

9315 LITTLE RIVER DR.

2. Principal Office Address

9315 LITTLE RIVER DR.

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

Zip

33147

Country

USA

Zip

Country

4. Date Incorporated or Qualified

To Do Business in Florida 4-29-2002

5. FEI Number

03-0443432

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**REINSTATEMENT 03-09**

**7. Name and Address of Current Registered Agent**

Name

ALLEN, DEMETRIUS

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

9315 LITTLE RIVER DR.

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33147

100038483621

122.50

06/30/04 - 01048 - 012 \*\*122.50

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

*Demetrius Allen*  
REGISTERED AGENT MUST SIGN

Date 6-22-04

**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
DP	ALLEN, DEMETRIUS	9315 LITTLE RIVER DR.	MIAMI, FL 33147
DT	SMITH, BRUCE	1540 NW 49TH ST.	MIAMI, FL 33142
DS	BARRETT, CHRISTOPHER	12871 NW GREEN AVE.	MIAMI, FL 33167

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)(f), 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:

*Demetrius Allen*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6-22-04 (305) 244-9050

Daytime Phone #

CR2E081 (01/04)

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June 22, 2004

Florida Department of State  
409 E. Gaines St.  
Tallahassee, FL 32399

Re: Albert Leroy Moss Foundation, Inc.


Dear Sir or Madam:

I enclose the corporate reinstatement for the above referenced corporation as indicated on the document to be filed. Also, I enclose a check in the amount of \$122.50 for 2003 and 2004 annual report fees. As per my telephone conversation with your representative, please accept this letter as notification, that annual report renewal forms were not received. Therefore, we were not aware of the corporate annual report filing process and deadline. It is my understanding that the reinstatement fee would be waived.

Should you have any questions, or problems with the document or filing, please call me at (305) 244-9056.

Thank you for your attention to this matter.

Sincerely,



Demetrius Allen  
President  
9315 Little River Drive  
Miami, FL 33147

Encls.  
LCJ:lr