

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 27 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000006907

1. Corporation Name

LET'S FIGHT BACK, INC.

Principal Place of Business

Mailing Address

1165 MARSEILLE DR., #12
MIAMI BEACH FL 33141

1165 MARSEILLE DR., #12
MIAMI BEACH FL 33141

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/09/2002

5. FEI Number

65-1152328

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	MILLS-MINCEY, DENISE	1165 MARSEILLE DR., #12	MIAMI BEACH FL 33141
VD	STEPHENS, LATAVIA LETERIA MILLS	4200 NW 11TH DR. 1165 MARSEILLE DRIVE #12	CAROL CITY FL 33055 MIAMI BEACH, FL 33141
VD	BULLING, CHERYL Marcia Chaney	12863 SW 49TH CT. 8981 Andora Drive	MIRAMAR FL 33027 Miramar, FL 33025
D	LEE, SHERYLL	19245 NW 53RD CIRCLE PLACE	MIAMI FL 33055
D	EDMONDS, ANDRICA	19420 NW 7TH CT.	MIAMI FL 33169

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~HOLDING, CHERYL~~
~~12863 SW 49TH CT.~~
~~MIRAMAR FL 33027~~

Name Marcia Chaney
Street Address (P.O. Box Number is Not Acceptable)
8981 Andora Drive
Suite, Apt. #, Etc.

City Miramar
State FL
Zip Code 33025

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Marcia Chaney
REGISTERED AGENT MUST SIGN

Date

10/13/03

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/03
Date

(954) 413-0410
Daytime Phone #

CR2E040 (7/03)

October 13, 2003

Greetings:

I would like to thank you for reading this letter; my name is Denise Mills-Mincey
I'm the Director of Let's Fight Back, Inc. I apologize that our information was not filed
On time due to the fact we did not receive the information at all. I'm requesting that the
Fee be waived and from this point forward we will make certain that we stay on top of
The information that have to file in a timely manner.

Thank you,



Denise Mills-Mincey
Director

PS:

I'm enclosing the reinstatement fee of \$61.25