

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

06 SEP 12 PM 10:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **NO2000008254**

1. Corporation Name

~~Opportunities Abound Network~~  
**Opportunities Abound in Careers,  
Incorporated**

2. Principal Office Address

**6152 9th Ave Circle NE**

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

**BRADENTON FLORIDA**

City & State

Zip

**34212**

Country

**MANATEE**

Zip

Country

**REINSTATEMENT**

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

**10/25/2002**

5. FEI Number

**113655064**

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

**Winston B. DeSue**

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

**3175 CASTLETON DRIVE UNIT D**

Suite, Apt. #, Etc.

**600079720156**

**09/12/06--01042--004 \*\*218.75**

City

**BRADENTON**

State

**FL**

Zip Code

**34208**

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

**Winston B. DeSue**  
**REGISTERED AGENT MUST SIGN**

Date **05 SEPTEMBER 06**

**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	MARIJANI JONES	1609 9TH AVENUE E.	BRADENTON FL 34208
VP	MARK E. LUCAS	912 DEANNY CIRCLE	BRANDON, FL 33511
S	PAULA S. CARTER	1250 102ND AVE	JACKSONVILLE, FL 32208
D	CHÉ YOUNG, Esq	152 CRESTMONT DR.	MACON GA 31206
D	DR. JULIUS DEMPS II	2442 WHISPERING LAWN LN	JACKSONVILLE FL 32145
D	DR. STACI SUGGS D.O.S.	8448 FINCH AVE E.	JACKSONVILLE, FL 32219

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 contained in Chapter 119, 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

**9/6/06**  
Date

Daytime Phone #

2/2

## MEMORANDUM


TO: FLORIDA DEPARTMENT OF STATE  
Secretary of State  
Division of Corporations

FROM: Opportunities Abound in Careers/N02000008254  
Opportunities Abound  
6152 9<sup>th</sup> Avenue Circle NE  
Bradenton, Florida 34212

RE: REINSTATEMENT REQUEST

Please reinstate the non profit organization named above for the reason of not receiving any notices or postcards related to filing in 2004 or 2005. The following non profit organization would like to continue to be active in the state of Florida. Your assistance is greatly appreciated in this matter.

Respectfully,



Wenston B. DeSue  
Principal