

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2008 FEB 25 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N05000002495

1. Corporation Name

VOICE OF THE YOUTH FOR POSITIVE LIVING, INC

2. Principal Office Address - No P.O. Box #

4211 NW 41 STREET

Suite, Apt. #, etc.

310

City & State

LAUDERDALE LAKES, FL

Zip

33319

Country

USA

3. Mailing Office Address

4211 NW 41 STREET

Suite, Apt. #, etc.

310

City & State

LAUDERDALE LAKES, FL

Zip

33319

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

03/03/2005

5. FEI Number
38-3747803

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

MARIE PIARD

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

4211 NW 41 STREET

Suite, Apt. #, Etc.

310

City

LAUDEDALE LAKES

State

FL

Zip Code

33319

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Marie Piard

Date 01/26/2008

REGISTERED AGENT MUST SIGN

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	TEDD J CHRISPIN	4211 NW 41 STREET APT 310	LAUDERDALE LAKES, FL 33319
T	NICOLE MORETTA	180 NW 18 STREET	POMPAHO BACH FL, 33060
S	SUZE LINDOR	590 92ND AVENUE	NAPLES, FL 34108
M	MADOCHÉ DORVAL	2401 SW 28 STREET # 204	COCONUT GROVE, FL 33133
M	YANICK SIMON	4211 NW 41 STREET # 310	LAUDERDALE LAKES, FL 33319

500118752705
02/25/08--01053--011 **367.50

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:

Suze Lindor, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/26/2008 954-709-6793

Date

Daytime Phone #

B. Mitchell FEB 25 2008