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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. APPLICATION FLORIDA DEPARTMENT OF STATE • FOR Sandra B. Mortham REINSTATEMENT Secretary of State DIVISION OF CORPORATIONS DIVISION OF CORPORATIONS			SMPLETING THIS FORM. AND FILED 98 DEC -7 PM 12: 05
DOCUMENT # NOG436 1. Corporation Name MIAMI SR. HIGH BANG PARENTS ASSOCIATION INC.			SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 2450 SW 1ST STRE MIAMI, FLORIDA If above addresses are incorrect in any way, line th	33/35	1	EINSTATEMENT <u>11-08</u>
2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable		If Applicable	4. Date Incorporated or Qualified To Do Business in Florida
Suite, Apt. #, etc. Suite, Apt. #, etc.		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	5. FEI Number Applied For
City & State	City & State		59-2140055 Not Applicable
Zip Country	Zip Coun	try _	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Names and Street Addresses of Each Officer and			3 directors)
Title(s) Name of Officers and/or Directors	{ c	treet Address of Each Officer and/or Director Use Post Office Box Nu	mbers) 4 City / State / Zip
170			MIAMI, FL 33105
VD YALILA M. GALLOR 2372 SW. 26 LANE MIAMI, FL 33133			
The ORLANDO R. RODRIGUEZ 932 NW 34th AVE MIAMI, FL 33125			
	- **		
			0000027081009. -12/03/9801114004 *****367.50 *****367.50-
8. Name and Address of Current	Registered Agent	Napre	Name and Address of New Registered Agent
IDANIA TEMINO		Box Number is Not Acceptable)	
2956 SW 3rd STREET 932 NW 344AVE Suite, Apt. #, Etc.			
MIAMI FL 33155		MIAMI	State Zip Code
10. I, being appointed the registered agent of the abo Signature of Registered Agent	Theques		
REGISTAGENT MUST SIGN 11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes IN NO			
12. 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: On Lando R. C.			

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Enclosed is a check for \$367.50 to reinstate the Miami Senior High Band Parents Association. This amount covers the fee of \$358.75 and the Certificate of Status for \$8.75.

Please forward the Certificate of Status to the mailing address below:

Miami Sr. High Band Parents Association c/o Orlando R Rodriguez 932 NW 34th Ave. Miami Florida 33125

Sincerely,

Orlando R. Rodriguez

Treasurer