

**CORPORATION
REINSTATEMENT**



FILED

09 FEB 17 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *NO 6000003704*

1. Corporation Name

BRAD'S PLACE, INC.

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

2341 N.W. 208th Street

Suite, Apt. #, etc.

3. Mailing Office Address

212 Grier Manor Ct.

Suite, Apt. #, etc.

City & State

MIAMI GARDENS, FL

Zip 33056

Country

USA

City & State

McDonough, GA

Zip 30253

Country

USA

7. Name and Address of Current Registered Agent

Name:

NAME: Willie Almeida Capers

Street Address **P.O. Box Number is Not Acceptable**

2341 NW 208 Street
Suite, Apt. #, Etc.

City MIAMI GARDENS

State
FL

Zip Code
33056

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

Willie Alfredo Capers
REGISTERED AGENT MUST

REGISTERED AGENT MUST SIGN

Date 1-27-2009

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
Pres.	MARY L. MCCOY	2341 N.W. 208 th St.	MIAMI GARDENS, FL 33056
VP	VIRGINIA F DAVIS	16160 N.W. 28 th PL	MIAMI GARDENS, FL 33056
Sec.	Willie A CAPERS	112 Grier Manor Court	Mc Donough, GA 30253
	REINSTATEMENT		
		RH	

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:

Willie Alfredo Capers Willie Alfredo Capers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #

Brad's Place, Inc.
2341 N.W. 208th Street
Miami Gardens, FL 33056
January 27, 2009

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Docket No. N06000003704
BRAD'S PLACE, INC.

Dear Reinstatement Department:

This letter is to request that you waive the reinstatement fee and allow us to reinstate our corporation with the State of Florida. We did not receive the reinstatement notice via mail. Per our telephone conversation, I am attaching a check for \$183.75.

We greatly appreciate in advance your consideration.

If you have any questions about this, please call me at (770) 875-8322.

Sincerely



Willie Alfrieda Capers,
Registered Agent

ALFREIDA MCCOY CAPERS

2341 N.W. 208th Street, Miami Gardens, FL 33056 • 770 875-8322 678-432-6635 home/fax •
alfriedacapers@bellsouth.net