

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 142

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N08166

1. Corporation Name

SOUTH DADE KENNEL CLUB INC

2. Principal Office Address

17855 SW 224th

Suite, Apt. #, etc.

0

City & State

MIAMI FL

Zip

33170

Country

USA

3. Mailing Office Address

17855 SW 224th

Suite, Apt. #, etc.

0

City & State

MIAMI FL

Zip

33170

Country

USA

FILED

05 MAR 21 PM 4:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 00-05

4. Date Incorporated or Qualified
To Do Business in Florida

7/28/86

5. FEI Number

59-2646708

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

ROBBIE N. ADDISON

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

17855 SW 224th

Suite, Apt. #, Etc.

0

City

MIAMI

State

FL

Zip Code

33170

200049885882

04/05/05--01008--009 **367 50

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

3/12/05

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	ODALYS HAYES	18505 SW 197 AVE	MIAMI FL 33187
VP	KATHY LAWSON	3652 SW 23rd	MIAMI FL 33145
SEC	ELLEN FERGUSON	7761 SW 134 AVE	MIAMI FL 33183
TREA	ROBBIE N. ADDISON	17855 SW 224th	MIAMI FL 33170
BOARD Dir.	JOAN ROSEN	18460 SW 15th	MIAMI FL 33187
BOARD Dir.	CLIFF SIMONIS	17855 SW 224th	MIAMI FL 33170

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 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/12/05

Daytime Phone #

305 247 1256

CR2E081 (01/05)

2 of 2

March 17, 2005

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32399

Re: Document #NO8166
Fed ID #59-2646708

Dear Sir or Madam:

Please note that we did not receive any notices to renew our non-profit organization, South Dade Kennel Club, Inc., from 2000 through 2005.

I am enclosing a check in the amount of \$367.50 to reinstate our club, as well as a completed Corporation Reinstatement form.

Please forward all documents or notices to:

Attention: Robbie N. Addison
Treasurer & Registered Agent
South Dade Kennel Club, Inc.
17855 S.W. 224 St.
Miami, FL 33170
Tel: (305) 247-1256 – day
Tel: (305) 248-9850 – night

We appreciate your prompt response.

Sincerely,



Robbie N. Addison
Treasurer & Registered Agent
South Dade Kennel Club, Inc.

Enclosures (2)