

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

**CORPORATION**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

02 MAY 20 PM 4:55

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # **N17320**

1. Corporation Name

Dade County Fireman's Benevolent Association, Inc.

*Handwritten initials*

2. Principal Office Address

6000 SW 87th Ave

3. Mailing Office Address

P O Box 1252

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

S. Miami, FL

Zip

33713

Country

USA

Zip

33243

Country

USA

**2001-2002 UBR**

4. Date Incorporated or Qualified To Do Business in Florida **10-15-86**

5. FEI Number **23-7034889**

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

**John Soeder**

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

**6000 SW 87th Ave**

Suite, Apt. #, Etc.

City

**Miami**

100005981994--2  
 State **FL** Zip Code **33125** 05/25/02--01071--026  
 \*13125 \*\*\*#13125

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

*John Soeder*

REGISTERED AGENT MUST SIGN

Date **5-13-02**

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	John Martin	14501 SW 161 St	Miami, FL
VP	James Adams	1280 E Franklin Ave	Homestead, FL
T	John Soeder	13825 SW 83rd Ave	Miami, FL
X0	Mike Rilla	15290 SW 47th St.	Miramar, FL
X0	Russ Burcham	1190 NW 90 Terr	Pembroke Pines, FL
S	Mike Barfield	16241 SW 287th St.	Homestead, FL

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:

*John Soeder*

John Soeder

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-13-02

Date

305-546-8636

Daytime Phone #

CR2E081 (9/01)

**BARRY I. HECHTMAN, P.A.**  
**Certified Public Accountants**

*Member of:*  
*Florida and American Institute of CPAs*  
*Private Companies and SEC Practice Sections*

8100 SW 81 Drive  
Suite 210  
Miami Florida, 33143-6603

Telephone: (305) 270-0014  
Fax: (305) 598-3695  
email: [barrycpa@netzero.net](mailto:barrycpa@netzero.net)

May 13, 2002

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Dade County Firemen's Benevolent Association, Inc.  
PO Box 1252  
S. Miami, FL 33243

EIN 23-7034889

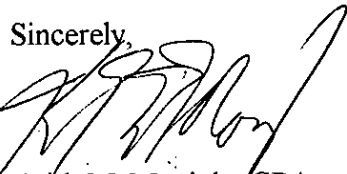
Dear Sir or Madam:

We are enclosing a check in the amount of \$122.50 in annual report fees for each year dissolved and a completed corporate reinstate report. As discussed with one of your representatives, the association never received the annual reports and were unaware that this needed to be filed with the state. The specific details are as follows:

The previous treasurer had the mailing address changed from the PO box to his home address. He moved to a different address at the time of his resignation. The new treasurer was unaware of the annual filing requirement and therefore was unaware that the forms should have been received and filed with the state. A cursory check of the state online database revealed that the corporation had been dissolved and immediately steps have been taken to reinstate the corporation.

Therefore, since the new treasurer was unaware of the requirement and since the association never received the annual corporate reports (which would have made him aware of the requirement) we are requesting that you waive the \$297.50 reinstatement fee.

Sincerely,



Keith McMonigle, CPA  
On behalf of association