PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

,00 JUN 19 PM 1:45

STATE.

	,	DIVISION OF CORPORATIONS				TAUL ATTAGSEE. FLORIDA						
DOCU		T# 17228	1)	·		,						
MINO	RITY_I	LAW_ENFORÇEME	NŢĮCOŲŊ	CIL,	INC.	<u>ئ</u> ر		=	۰. و		محد	. <u>_</u>
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2. Principal Office Address 1106 SOUTH MANGONIA CR. P.O.					2 1652							
	Suite, Apt. #, etc. Suite, Ap						<u> </u>					
							4. Date Incorporated or Qualified To Do Business in Florida					
,	City & State City & S				REACH	FLORID	S EEI Number Appl					lied For
WEST PALM BEACH, FL Zip Country			Zip	,				76140			Not .	Applicable
33401			1			λ	6. CERTIFIC	ATE OF STATUS	S DESIRED [ee required of Status
33401	01 UNITED STATES 33409 U.S.A. — Hora Certificate of State 7. Name and Address of Current Registered Agent											
	Name	· · · · · · · · · · · · · · · · · · ·						· · · -			-	
	ATTORNEY V. LYNN WHITFIELD											
		dress (P.O. Box Number is N DATURA STREE				3 000 03325593 -07/18/0001004				¦.≘: 1∩∩		
Suite, Apt. #, Etc.									**122.j		<u>*</u> 122	. 50
	918							State	Zip Code			
<u> </u>	WEST PALM BEACH							FL	33401			
8. I, biling	appointed th	e registered agent of the abo	ove named corpo	oration, am	familiar with a	and accept the o	bbligations of se	ction 607.050	5 or 617.05	03, F.S <i>.</i>		
Signature of			ski	m				Data	و ـــــو	J/5,	200	\sim
Registered	Agent	\rightarrow	EGISTERED AG	ENT MUS	T SIGN	·		Date_		 		
9. Names	and Street A	Addresses of Each Officer an	d/or Director (Ft	orida nonpr	ofit corporation	ons must list at le	east 3 directors	l				
Titles	Name of Officers and/or Directors					Address of Eac r and/or Directo		City / State / Zip				
PRES	BEVERLY ELLIOTT MORRISON			1106	S. MA	NGONIA	CIRCLE	WEST	PALM	BEACH	, FL	3340
SEC. P	ALPHON	ISO BRAT		4354	НЕАТН	CR. SO	UTH	W. PA	LM BE	EACH,	FL 3	3407
TREAS	CHARLEY NAPIER			2622	MONAC	O TERRA	PALM BEACH GARDENS FLORIDAM GARDENS					
-											<u> </u>	
MITTER OF THE STATE OF THE STAT										99-00	482	<u>rs</u>
this rei	nstatement a	officer or director or the rece pplication, the reason for dis- ation have been paid and the	solution has been	n eliminated	d, the corpora	ite name satisfie	s the requireme	nts of section	607.0401 o	r 617.0401, f	S., that	all fees

on this application is try and accurate, and my signature shall have the same legal effect as if made under oath.

FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA

JUNE 14, 2000

DEAR SIR,

PLEASE ACCEPT THIS LETTER AS NOTIFICATION THAT THE MINORITY LAW ENFORCEMENT COUNCIL DID NOT RECEIVE THE RENEWAL FORMS FOR THE PAST TWO YEARS. THE FORMER PRESIDENT MOVED FROM THE AREA AFTER A DIVORCE AND THE MAIL CONTINUED TO GO TO THE ADDRESS OF HIS FORMER WIFE. PLEASE ALLOW US TO RENEW WITH THE ENCLOSED CHECK AND RENEWAL APPLICATION.

THANK-YOU IN ADVANCE FOR YOUR COOPERATION IN THIS

THANK-YOU IN ADVANCE FOR YOUR COOPERATION IN THIS MATTER.

I encerely Berefathores

President