

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 APR 17 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N38387

1. Corporation Name

ADOLESCENT PRIMARY PREGNANCY PREVENTION LEARNING
ENRICHMENT PROJECT, INC.

Principal Place of Business

~~150 NW 78 ST~~
~~MIAMI FL 33150~~

Mailing Address

~~150 NW 78 ST~~
~~MIAMI FL 33150~~



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

05/30/1990

Suite, Apt. #, etc.

2351 NW 196 Street
Miami, Florida

Suite, Apt. #, etc.

2351 NW 196 Street
Miami, Florida

5. FEI Number

65-0200458

Applied For

Not Applicable

Zip

33056 USA

Zip

33056 USA

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
OFFICER P.D.	NEUBOLD, MAUDE P. A. Nadine Gay	1070 NW 88 ST 2351 NW 196 Street	MIAMI FL Miami, FL 33056
OFFICER D.	DAVENHAM, MARGARET P. Mamie Williams-Newton	2404 NW 112 ST 8159 NW 12 Court	MIAMI FL Miami, FL 33147
OFFICER D.	SHIVERS, E. E. Pernella Burke	3007 NW 57 ST 1380 NW 96 Street	MIAMI FL Miami, FL 33147
			300002497063--1 -04722/98--01105--002 ****306.25 ****306.25

8. Name and Address of Current Registered Agent

~~JONES, MATTYE~~
~~8875 NW 1 AVE~~
~~EL PORTAL FL 33150~~

9. Name and Address of New Registered Agent

Name

A. Nadine Gay

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

2351 NW 196 Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33056

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

A. Nadine Gay

REGISTERED AGENT MUST SIGN

Date

3-16-98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on Intangible tax.)

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:

A. Nadine Gay

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3-16-98 305-620-9002

Daytime Phone #

CR2040 (8/97)