	DI 5405		II NOT	DUCTIONS	DEFODE C	NOMBI ETI	NO TUIC F			
APF	PLICATION FOR	HEADA	FLORIDA	RUCTIONS A DEPARTMEN Sandra B. Mor Secretary of S	NT OF STATE	OMPLETI	NG THIS F	OHIVI.		
REINSTATEMENT				VISION OF CORPOR		_	FILED			
DOCUMENT # N39927 1. Corporation Name						97 APR 24 PM 4: 24				
FI	orida Ne	Hall		ociati	<u>on</u>	SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business Mailing Address Flor 10A 2736 N.W. 41th Terroce										
hauderdale Lakes, FL. 33313							_	0 /	A-7	
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										
2. New Principal Office Address, If Applicable 3. New Mailin 2736 N.W. 47th Terrace P.D.				no Office Address, If Applicable 4. Date To Do			corporated or Qualified Business in Florida 9-13-95			
Suite, Apt.			Suite, Apt. #,			5. FEI Number		7-73-7	Applied For	
City & State		Florida	City & State	Miami	Florida		85901		Not Applicable	ļ
^{Ζιρ} 333 13	3 Country	ard _	^{Zip} 3 3み		5.A.		OF STATUS DESIRE		litional Fee required artificate of Status	
7. Names a		of Officer and/o of Officers of Directors	r Director (Flo	Stri Off	eet Address of Each ficer and/or Director se Post Office Box t	n r	-05/06 4 ****2	7970104 3 9 ilys 6 late 47	B001 **297.50	
P	Caroline Forbes			2736 N.W. 47th Terrace Landerdale Lakes FL					FL 33313	
VP	Violet Dougherty			9287 S.W. 146th Place Miami, FL 33180					•	
5	5 Nadine Purner			11341 S.W. 145th Ave Miami, FL 331B6						
D	Hazelle Rogers			300 N	.w. 27th	Street	Landerdo	ale Lake	s EL 33311	
D	Faith Bryan-Knight			8530 NU	0. 746 (Court	<i>fembrote</i>	Pines, 1	-133024	ļ
D Alicia Dunbar 8. Name and Address of Current Registered Age					hampion.	B. Name and Address of New Registered Agent				
					Street Address (I	(،ω , ₄₇ *	Forbes je Not Acceptable) Pertrace	· · · · · · · · · · · · · · · · · · ·	:	CR2E040 (12/96)
9thy Auderda						ale hak	es		Code 3.3.1.3	
10. I, being Signature o Registered		i R	. Ja	bes	th and accept the o	bligations of Secti	on 607.0505, F.S. Date	14.97	Do	hп
11. Do	pes this corporatept, of Revenue	ion pay a	ny intang	ible tax to th	e utes. Yes		(Se	e other side for in on intangible to	nformation	4'
12. I certify this rein owed by	that I am an officer or direc statement application, the r r the corporation have been application is true and accur	tor or the receive eason for dissoli paid and the na	er or trustee en ution has been ames of individi	npowered to execute eliminated, the corpo uats listed on this form	this application as prate name satisfies modern of quality for	provided for in cha the requirements an exemption uno	of section 607,0401	or 617.0401. F.:	S., that all fees	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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