

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV -4 PM 5:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N40169

1. Corporation Name

HIALEAH MIDDLE SCHOOL SUNSHINE FUND, INC.

Principal Place of Business

6027 E. 7 AVENUE
HIALEAH FL 33013

Mailing Address

6027 E. 7 AVENUE
HIALEAH FL 33013

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/01/1990

5. FEI Number

65-0218546

Applied For

Not Applicable

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DP	BUCKARDT, LOURDES Allison D. Lasbury	8321 SW 21 ST 3714 Segovia St.	MIAMI FL 33155 Coral Gables, FL 33134
DV	LINTZ, JEFF	1867 SW 50 CT	COOPER CITY FL 33330
DT	MOLINA, LISSETTE	6835 SW 112 ST	MIAMI FL 33156
DS DV	ERHARDT, VICTORIA	1125 DOVE AVE	MIAMI SPRINGS FL 33166

800008783998
11/04/02-01064-009 **\$1.25

8. Name and Address of Current Registered Agent

~~BUCKHARDT, LOURDES~~
~~8321 SW 21 ST~~
~~MIAMI FL 33155~~

9. Name and Address of New Registered Agent

Name

Allison D. Lasbury

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

3714 Segovia St.

Suite, Apt. #, Etc.

City

Coral Gables

State
FL

Zip Code
33134

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. or 617.0505, F.S.

Signature of
Registered Agent

Signature of Allison D. Lasbury
REGISTERED AGENT MUST SIGN

Date 10/23/02

11. 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 of Allison D. Lasbury
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/23/02 305-681-3527

Date

Daytime Phone #

CR2E040 (8/02)



Miami-Dade County Public Schools

giving our students the world

Principal

Ms. Raquel Montoya

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, FL 32314

Miami-Dade County School Board

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Superintendent
of Schools

Merrett R. Stierheim

Dear Mr. Smith,

This letter is sent in regards to the "Notice of Administrative Dissolution or Revocation" form that was delivered to our location on October 22, 2002. This is the first and only letter that has been received by our group for the 2001/2002 year. The two prior (UBR) Uniform Business Report notices, referred to in your document, were apparently not sent to the correct address or individual this year.

Enclosed, please find the updated Application for Reinstatement and the fee (without penalty) in the amount of \$61.25.

Thank You,

Sincerely,

Allison D. Lasbury
Hialeah Middle School Sunshine Fund, Inc.
President and Director