PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 MAY 22 AM 11:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

YBR
01-02

DOCUMENT # N45048

1. Corporation Name
Citizens Against Pet Overpopulation Inc.

2. Principal Office Address	**3.** Mailing Office Address
3200 W. Oakland Pk Blvd.	1219 SW 5th CT.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lauderdale Lakes, Fl	City & State: Fort Lauderdale, Fl
Zip: 33311 Country: USA	Zip: 33312 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 09/09/1991

5. FEI Number: 65-0329248 ☐ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name: Sally E. Matluk Boisseau

Street Address (P.O. Box Number is Not Acceptable): 3200 W. Oakland Pk Blvd.

Suite, Apt. #, Etc.:

800005694678--5
-06/06/02--01054--022
****122.50 ****122.50

City: Fort Laud. Florida | State: FL | Zip Code: 33311

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: S. Matluk Boisseau — Date: 4-18-02
REGISTERED AGENT MUST SIGN

CR2E081 (9/00)

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
Pres.	Sally E. Boisseau D	1219 SW 5th COURT	Fort Lauderdale, Fl. 33312
V.P.	John E. Boisseau D	1219 SW 5th Court	Fort Lauderdale, Fl 33312
Sec.	Geraldine Tell D	1201 SW 5th Court	Fort Lauderdale, Fl. 33312

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: S. Boisseau Pres. Sally E Boisseau, 4-18-02 954-463-1320
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #