

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

DOCUMENT # N47470

1. Corporation Name

MIAMI KILLIAN SENIOR HIGH BAND PATRONS ASSOCIATION, INCORPORATED

Principal Place of Business

Mailing Address

P.O. BOX 180864
MIAMI FL 33116-0864
US

P.O. BOX 180864
MIAMI FL 33176

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

02/20/1992

5. FEI Number

65-0237207

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ **LY**

\$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
PD	WEXLER, STANLEY Susan Duenas	10048 S.W. 125 STREET 11921 SW 122nd Avenue	MIAMI FL 33176 33186
VD	JORLING, GARMEN Alan Frankel	10006 S.W. 125 STREET 12720 SW 114 Avenue	MIAMI FL 33176
SD	BLANCO, PATRICIA D Eve Matthews	12045 S.W. 113 CT. 11511 SW 80th Terrace	MIAMI FL 33176 33173
TD	SANTOS, ESTHER Philip Valentino	11890 S.W. 112 AVENUE CIR. 7825 SW 98th Street	MIAMI FL 33176 33156
VD	Ray Falcon	10200 SW 124th Avenue	Miami FL 33186
SD	Rita Berkowitz	11540 SW 82nd Terrace	Miami FL 33173

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~WEXLER, STANLEY~~
~~10048 S.W. 125 STREET~~
~~MIAMI FL 33176~~

900002960139--1
-08/16/99--01007--010
***306.25 ***306.25

Name

Alan Frankel

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

12720 SW 114 Avenue

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33176

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

Alan J. Frankel

REGISTERED AGENT MUST SIGN

Date

08/02/99

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

Yes ☐ No ☐ N/A

(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:

Alan J. Frankel

ALAN I FRANKEL

8/4/99

(305) 278-8060

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20040 (9/98)