

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR -9 PM 4:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N95000002542**

1. Corporation Name

**Miami Childrens' Centennial Projects
Inc.**

2. Principal Office Address

13250 NW 28 AVE.

Suite, Apt. #, etc.

3. Mailing Office Address

13250 NW 28 AVE

Suite, Apt. #, etc.

City & State

OPA-LOCKA

City & State

OPA-LOCKA

Zip

33054

Country

Miami Dade

Zip

33054

Country

Miami Dade

4. Date Incorporated or Qualified
To Do Business in Florida

5/24/95

5. FEI Number

65-0583215

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

CHARLES I. OGUGUA

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

13250 NW 28 AVE.

Suite, Apt. #, Etc.

City

OPA-LOCKA

State

FL

Zip Code

33054

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

Charles I. Ogugua

Date

3/3/04

REGISTERED AGENT MUST SIGN

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
D	DORETHA NICHSON	2190 NW 135 ST.	OPA-LOCKA FL 33054
D	DIUTO ESIORU	2912 College Ave	DAVIE FL 33314
D	PAUL FOSTER	1895 J.W Foster Blvd	Canton Mass. 02021
D	MATTIE MARSHALL	1031 NW 88 Street	Miami FL 33015
D	GREGORY NIJOKU	13250 NW 28 AVE	OPA-LOCKA FL 33054
D	CHARLES OGUGUA	13250 NW 28 AVE	OPA-LOCKA FL 33054

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:

Charles I. Ogugua

CHARLES OGUGUA 3/3/04 805-7695625

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)