

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVAL  
AND  
FEE

05 MAY 25 PM 3:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #**

**1. Corporation Name**

Help Is Here, Inc #N96000001992

100055833141  
06/06/05--01064--011 \*\*421.00

W05-24357

~~W05-24357~~

**2. Principal Office Address**

1970 NW 190 Terrace,

**3. Mailing Office Address**

1970 NW 190 Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33056

Country

USA

Zip

33056

Country

USA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

1992

**5. FEI Number**

65-0658194

☒ Applied For

☐ Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☒**

\$8.75 Additional Fee required  
for a Certificate of Status

REINSTATEMENT

02-05

**7. Name and Address of Current Registered Agent**

Name

Help Is Here, Inc

CORA Mathis

Street Address (P.O. Box Number is Not Acceptable)  
1970 NW 190 Terrace,

Suite, Apt. #, Etc.  
N/A

City

Miami

State

FL

Zip Code

33056

**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

Cora Lee Mathis

REGISTERED AGENT MUST SIGN

Date April 15, 2005

**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	Miguel Gonzalez	221 Aragon Avenue, Suite #204	Coral Gables, FL 33134
VP	Eduardo Florez	1172 South Dixie Hwy, Suite 174	Coral Gables, FL 33146
Sec	Donna Williams	315 NW 192 Street	Miami, FL 33169
Ast/Sec	Cassandra Taylor	2783 NW 198 Terrace	Miami, FL 33056
Treas	Gayle Kimball-Snead	17961 NW 40 Court	Miami, FL 33055
Fou/Di	Cora Lee Mathis	1970 NW 190 Terrace	Miami, FL 33056

**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:

Cora Mathis

Cora Lee Mathis

4/15/05

786-315-1078

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/05)