

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JAN 29 AM 10:49

DOCUMENT # N96000006411

1. Corporation Name

GRAY PANTHERS OF NORTH DADE INC.

2. Principal Office Address

CLAUDE YANOW
1200 NE MIAMI GARDENS DRIVE #420

Suite, Apt. #, etc.

420

City & State

NORTH MIAMI BEACH

Zip

33179

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

03-04

4. Date Incorporated or Qualified
To Do Business in Florida

1996

5. FEI Number

65044321

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

CLAUDE YANOW

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

1200 NE MIAMI GARDENS DRIVE

Suite, Apt. #, Etc.

420

City

NORTH MIAMI BEACH

State

FL

Zip Code

33179-4711

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

Claire Yanow

Date

1-25-04

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
CO-CHAIRMAN	DOROTHY FLEISHER	861 N. VENETIAN DR.	MIAMI, FL 33139
CO-CHAIRMAN	REBECCA ROSEN	2777 NE 183 ST. #426	MIAMI, FL 33139
SECRETARY	CLAUDE YANOW	1200 NE MIAMI GARDENS DR.	NORTH MIAMI BEACH, FL
TREASURER	GERTRUDE GREENBERG	2777 NE 183 ST. #420	MIAMI 33179-4711
	MARY BREDEMETER	7441 WAYNE AVE. #150	MIAMI BEACH 33141

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:

Claire Yanow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-25-2004

Daytime Phone #

305-944-1585

CR2E081 (10/02)