PLEASE READ ALL INSTRUCTIONS BEFORE C

APPLICATION FOR REINSTATEMENT

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

FILED
Feb 26 1999 8:00 am
Secretary of State

TALLAHASSEE, FLORIDA

DOCUMENT # N97000005287

1. Corporation Name
OAKLAND PARK COMMUNITY CENTER, INC.

Principal Place of Business
2800 WEST OAKLAND PARK BLVD.
OAKLAND PARK FL. 33311

Mailing Address

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
N/A	OAKLAND PARK COM CEN. INC
Suite, Apt. #, etc.	P.O. BOX 1601
City & State	POMPANO BEACH FL.
Zip / Country	33061 / USA

REINSTATEMENT 08-99

4. Date Incorporated or Qualified To Do Business in Florida 09/17/1997

5. FEI Number 65-0782238 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $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
DIRECTOR PRES.	FERNANDO GANDON	561 SE 18 AVE	POMPANO BCH FL 33060
DIRECTOR	HATUEY ELIZAGARATE	909 SURFSIDE BLVD.	SURFSIDE FL. 33154
DIRECTOR	JOHN MCCARTHY	80 S.W. 8TH AVE	DANIA FL. 33304

500002788125--4

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL. 32301-2525

9. Name and Address of Registered Agent

Name FERNANDO GANDON
Street Address (P.O. Box Number is Not Acceptable) 561 S.E. 18 AVE
Suite, Apt. #, Etc N/A
City POMPANO BEACH
State FL Zip Code 33060

CR2E081 (12/98)

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 [signature] REGISTERED AGENT MUST SIGN Date 2/23/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☑ (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: [signature] FERNANDO GANDON 2/23/99 954 684-1493
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(2)

CSC THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 147369 9017A

AUTHORIZATION : Patricia Pyzik

COST LIMIT : $ 306.25

ORDER DATE : February 24, 1999

ORDER TIME : 9:10 AM

ORDER NO. : 147369-005

CUSTOMER NO: 9017A

CUSTOMER: Dennis Stewart, Esq
Dennis Stewart, P.a.
2nd Floor
312 S.e. 17th Street
Fort Lauderdale, FL 33316

DOMESTIC FILINGS

NAME: OAKLAND PARK COMMUNITY CENTER, INC.

Please give original ... as file date ... mission

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS _____