


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N98000003783			
1. Corporation Name KRISTINA ESTATES NEIGHBORHOOD COALITION, INC.			
2. Principal Office Address 19755 SW 134th Court Suite, Apt. #, etc.		3. Mailing Office Address 19755 SW 134th Court Suite, Apt. #, etc.	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33177	Country USA	Zip 33177	Country USA

FILED
02 DEC -3 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REINSTATEMENT 99-02

4. Date Incorporated or Qualified To Do Business in Florida 6/26/98	
5. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name Rudolph D. Griffith	
Street Address (P.O. Box Number is Not Acceptable) 19755 SW 134th Court	
Suite, Apt. #, Etc.	
City Miami	State FL Zip Code 33177

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

Rudolph D. Griffith
REGISTERED AGENT MUST SIGN

Date 08/12/02

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
P/D	Rudolph D. Griffith	19755 SW 134th Court	Miami, FL 33177
VP/D	Jeffrey Major	19751 SW 134th Court	Miami, FL 33177
S/D	Lester Rock	19471 SW 134th Court	Miami, FL 33177
T/D	Lula G. Pearson	19790 SW 134th Court	Miami, FL 33177

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rudolph D. Griffith Rudolph GRIFFITH

Date

08/12/02

Daytime Phone #

(305)281-7684
(305)281-7684

CR2E081 (9/01)