

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2008 MAR 13 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N99000001089

1. Corporation Name

Allapattah Community Development and Betterment

2. Principal Office Address - No P.O. Box #

1328 N.W. 38th Street

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Miami

City & State

Zip

33142

Country

U.S.A.

Zip

Country

CR2E081 (12/07)

4. Date Incorporated or Qualified
To Do Business in Florida

2/18/1999

5. FEI Number

65-0857823

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

Sandy Alan Riettie

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

1328 N.W. 38th Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33142

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Sandy A. Riettie

REGISTERED AGENT MUST SIGN

Date 3/3/2008

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.	Sandy Alan Riettie	1328 N.W. 38th Street	Miami, Florida 33142
V.P.	Warren Duty	18020 N. W. 31st Avenue	Miami, Florida 33056
Tres.	Annette E. Howell	18730 N.W. 44th Court	Miami, Florida 33055

REINSTATEMENT

2002-08

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 contained in Chapter 119, 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: *Sandy A. Riettie* Sandy Alan Riettie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/2008

Date

954-599-0861

Daytime Phone #