

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP -2 AM 8:47

DOCUMENT # *N99 000 00 4958*

1. Corporation Name
BOCA RATON MARTIN LUTHER KING MEMORIAL FOUNDATION
INC.

C/O JOHN MARTIN III

REINSTATEMENT *02-03*

2. Principal Office Address

190 NE 15TH TR

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

Zip
33432

Country
USA

3. Mailing Office Address

190 NE 15TH TR

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

Zip
33432

Country
USA

900021236119

*09/02/03--01046--018 **\$1.25*

4. Date Incorporated or Qualified
To Do Business in Florida

08/19/99

5. FEI Number

65-0945601

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

Joshua Perstin, Esq.

900021236119

*07/01/03--01026--003 **\$2.25*

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

399 West Palmetto Park Rd

Suite, Apt. #, Etc.

Suite 108

City

Boca Raton, FL 33432

State
FL

Zip Code

33432

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

5/22/03

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
D	RICH, MOLLY B.	70 SE 11TH ST. 11-A	BOCA RATON, FL 33432
D	MARTIN III, JOHN	10927 GALLERY ST.	BOCA RATON, FL 33428
D	BROWN, JOHN E.	5980 N. DIXIE HWY	BOCA RATON, FL 33487

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:

John Martin III *John Martin III*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/16/03

Daytime Phone #

961 218-0274