

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED

02 JUL 31 PM 4:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N99000004990

**1. Corporation Name**

VENISEE GROUP HOME, INC.

**REINSTATEMENT 00-02**

**2. Principal Office Address**

5281 N.W. 180th TERRACE

**3. Mailing Office Address**

6281 N.W. 180th TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33169

Country

DADE

Zip

33055

Country

DADE

**4. Date Incorporated or Qualified  
To Do Business in Florida**

08/16/99

**5. FEI Number**

☒ 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

JAMES VENISEE

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

5281 N.W. 180th TERRACE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33055

**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

*James Venisee*  
REGISTERED AGENT MUST SIGN

Date JUNE 26th, 2002

**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.	FREDONIA VENISEE	5281 N.W. 180th TERRACE	MIAMI, FLORIDA 33055
DIR	JAMES VENISEE	5281 N.W. 180th TERRACE	MIAMI, FLORIDA 33055
DIR	VERNNETA PRATERE	3801 N.W. 74th STREET	MIAMI, FLORIDA 33147
DIR	BARBARA BOWE	17957 S.W. 36th STREET	MIRAMAR, FLORIDA 33029

**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:

*Fredonia Venisee*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUNE 26th, 2002

Date

Daytime Phone #

CR2E081 (9/01)