

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P00000029548**

1. Corporation Name

**NEW GENERATION ACADEMY, INC.**

W04-8253

2. Principal Office Address

**13254 SW 106 AVE**

Suite, Apt. #, etc.

City & State

**MIAMI FLORIDA**

Zip

**33176**

Country

**USA**

3. Mailing Office Address

**13254 SW 106 AVE**

Suite, Apt. #, etc.

City & State

**MIAMI FLORIDA**

Zip

**33176**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**3/22/00**

5. FEI Number

**65-0999858**

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 SAMAROO**

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

**13254 SW 106 AVE**

Suite, Apt. #, Etc.

City

**MIAMI FL 33176**

**000029545290**

**02/11/04--01018--015 \*\*150.00**

**000028545290**

**03/10/04--01052--010 \*\*150.00**

State

**FL**

Zip Code

**33176**

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 Samaroo**

REGISTERED AGENT MUST SIGN

Date

**2/5/04**

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
President	JAMES SAMAROO	13254 SW 106 AVE	MIAMI FL 33176
V.P.	JENNIFER PAUL	15550 SW 80th ST #303	MIAMI FL 33193

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:

**James Samaroo**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/5/04**

Date

**305 598 9595**

Daytime Phone #

CR2E081 (01/04)

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*New Generation Academy*

Depart Of State  
Division of Corporations  
P.O.Box 6327  
Tallahassee, FL 32314

This is to notify that New Generation Academy, Inc. never received the annual report to renew, and request that the reinstatement fee be waived, to renew the corporation and make it current.

Enclosed is the annual fee of \$150.

Thank you,

*James Samaroo*  
James Samaroo

Registered Agent.

New Generation Academy, Inc.