

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

02 APR 19 AM 10:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P00000036381**

1. Corporation Name

**MARACA GROUP, INC.**

Principal Place of Business

161 NORTHEAST 107TH  
MIAMI SHORES FL 33161

Mailing Address

161 NORTHEAST 107TH  
MIAMI SHORES FL 33161

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

**REINSTATEMENT** 01-02

4. Date Incorporated or Qualified  
To Do Business in Florida

04/11/2000

5. FEI Number

65-0998066

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	PANEQUE, MIGUEL AH	161 NORTHEAST 107TH AH	MIAMI SHORES FL 33161 AH
P VSTD	HERRERA, ALMA	161 NORTHEAST 107TH	MIAMI SHORES FL 33161

100005449681--4  
-05/03/02--01049--005  
\*\*\*\*900.00 \*\*\*\*900.00

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name **Labib Baltagi**  
Street Address (P.O. Box Number is Not Acceptable) **701 NE 125<sup>th</sup> ST**  
Suite, Apt. #, Etc.  
City **N. Miami** State **FL** Zip Code **33161**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

2/11/02

11. 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

Date

Daytime Phone #

2/11/02 (305) 758-4890

CR2E040 (8/01)

Visual Vista Biz, Inc.

April 9, 2002

Florida Department of State  
Katherine Harris, Secretary of State  
Division of Corporations,  
Doug Spitler, Document Specialist,  
Division of Corporations  
P.O. BOX 6327  
Tallahassee, Florida 32314

Re: Document Number 65-0998066

This letter is to inform you that the Articles of Amendment to the Articles of Incorporation of MARACA GROUP, INC. is now changing its name to VISUAL VISTA BIZ, INC., a Florida corporation.

Should you have any questions regarding this matter, please telephone Alma Herrera,  
at (305) 758-4890.

Alma Herrera,



President,  
Visual Vista Biz, Inc.

cc: IRS, Business Corporations Department

161 North East 107 Street, Miami Shores, Florida 33161

Tel: 305 758 4890 Fax: 305 758 2690

# Visual Vista Biz, Inc.

April 9, 2002

IRS  
Holtsville, N.Y. 00501

Re: Document Number 65-0998066

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Should you have any questions regarding this matter, please telephone Alma Herrera,  
at (305) 758 -4890.



Alma Herrera,

A handwritten signature in cursive script, appearing to read 'Alma Herrera'.

President,  
Visual Vista Biz, Inc.

cc: Florida Department of State, Doug Spitler, Division of Corporations

161 North East 107 Street, Miami Shores, Florida 33161

Tel: 305 758 4890 Fax: 305 758 2690

