

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUL 21 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 01000077186

1. Corporation Name
Nietos Concessions, Inc.

14884 SW 33 Terr.
14884 SW 33 Terr.

2. Principal Office Address
14884 SW 33 Terr.

3. Mailing Office Address
14884 SW 33 Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, Fla.

City & State
Miami, Fla.

Zip
33185

Country

Zip
33185

Country

900039357819
07/21/04--01005--012 ***300.00
REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida August 6, 2001

5. FEI Number
65-1130074

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
De Armas, Pablo Jr

Street Address (P.O. Box Number is Not Acceptable)
14884 S.W. 33rd Terr.

Suite, Apt. #, Etc.

City
Miami

State
FL

Zip Code
33185

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

Date

REGISTERED AGENT MUST SIGN

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
P.	Pablo De Armas Jr.	14884 S.W. 33rd Terr.	Miami, Fl. 33185

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:

Pablo De Armas Jr.

Pablo De Armas Jr. 7/15/04 (305) 970-1570

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED01 (01/04)

2052

Nietos Concessions, Inc
14884 S.W. 33rd Terr.
Miami, Fl. 33185
(305) 970-1570

July 15,2004

FEIN # 65-1130074

Thru this letter I am informing that I never received
The 2003 profit corporation uniform business report, enclosed is the
Reinstatement form and a payment as I was told to do.

Sincerely,



Pablo De Armas Jr. (president)