

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 OCT -9 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000009833

1. Corporation Name

DYNACOUSTICS, INC

2. Principal Office Address

13239 SW 143 TERR

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

Zip

33186

Country

U.S.A

3. Mailing Office Address

13239 SW 142 TERR

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

Zip

33186

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

01/27/2003

5. FFL Number

27-0044512

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

GAMBOA WILLY A

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

13239 SW 143 TERR

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33186

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 09/20/2006

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	GAMBOA, WILLY A	13239 SW 143 TERR	MIAMI FL 33186
	<i>02/10/10</i>		

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 contained in Chapter 119, 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/20/2006 (305)232-0727

Date

Daytime Phone #

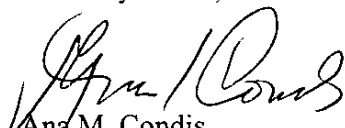
September 20, 2006

RE: DYNAACOUSTICS, INC
P03000009833

To Whom It May Concern:

Enclosed please find a check in the amount of \$300.00 dollars due to the fact that my client never received the renewal form for the annual report for 2005 and 2006 if you kindly forgive the penalties and activate his corporation to an active status will be greatly appreciated.

Sincerely Yours,



Ana M. Condis
Accountant