

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 FEB 10 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000001806

1. Corporation Name

HERMES MUSIC INTERNATIONAL, INC.

Principal Place of Business

C/O MARJORIE E. WOLASKY, ESQ.
7103 SW 102ND AVE., #A
MIAMI FL 33173

Mailing Address

C/O MARJORIE E. WOLASKY, ESQ.
7103 SW 102ND AVE., #A
MIAMI FL 33173

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.

6968 N.W. 50 ST.

City & State

Miami, FL

Zip

3 3166

Country

USA

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/12/1995

5. FEI Number

74-2389792

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	SAAVEDRA, JORGE A	2508 TAMARACK	MCALLEN TX 78501
TS	SAAVEDRA, CRISTINA	2508 TAMARACK	MCALLEN TX 78501
V	MORRISON, GREGORY	604 JONQUIL	MCALLEN TX 78501
S	MORALES, GERARDO	602 HIBISCUS, #B	MCALLEN TX 78501
DC	KREIMERMAN, ALBERTO	1404 E. BUSINESS	MISSION TX 78572

8. Name and Address of Current Registered Agent

WOLASKY, MARJORIE E ESQ
7103 SW 102ND AVE., #A
MIAMI FL 33173

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Not Permitted)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

Marjorie E Wolasky

REGISTERED AGENT MUST SIGN

Date

2/3/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. 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:

JORGE SAAVEDRA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-6-97 (210) 781-8472