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
96 AUG 30 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # G60216

1 Corporation Name
TURISMO EL GLOBO, INC.
(TOURIST OF THE GLOBE, INC.)

Principal Place of Business
1470 N. W. 79th Avenue
Miami, FL 33126

Mailing Address
SAME

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

2 New Principal Office Address If Applicable
1470 N.W. 79th Ave.
Suite, Apt #, etc
City & State Miami, FL
Zip 33126 Country USA

3 New Mailing Address If Applicable
SAME
Suite, Apt #, etc
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4 Date Incorporated or Qualified To Do Business in Florida

5 FEI Number ✓ Applied For ☐ Not Applicable

6 CERTIFICATE OF STATUS DESIRED XX $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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PVT	Eduardo Urdaneta	151 Crandon Blvd., #826	Key Biscayne, FL, 33149
AS	Gustavo Gutierrez	7950 W. Flagler St. #104	Miami, FL, 33144

85-96 AP

REINSTATEMENT

8. Name and Address of Current Registered Agent

Conrado Alfonso
117 Lore Lane Place
Key Largo, FL 33037

9. Name and Address of New Registered Agent

Name Conrado Alfonso
Street Address (P.O. Box Number is Not Acceptable) 117 Lore Lane Place
Suite, Apt #, Etc
City Key Largo State FL Zip Code 33037

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 [signature] Date 5/10/96
Conrado Alfonso
REGISTERED AGENT MUST SIGN

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

12 I do hereby certify that the information supplied with this filing ... Section 119.07(3)(x) ... this reinstatement application ... fees owed by the corporation have been paid. 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: x [signature] 6/11/96 (305) 5944954
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR