

2004
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

04 JUL -7 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K87154

1. Corporation Name

R. AGUILA, CORPORATION

2. Principal Office Address

18855 N.W. 79th Court

Suite, Apt. #, etc.

City & State

Miami Florida

Zip

33015

Country

USA

3. Mailing Office Address

18855 N.W. 79th Court

Suite, Apt. #, etc.

City & State

Miami Florida

Zip

33015

Country

USA

REINSTATEMENT 03-04

05/05/03 91392 036 \$150.00 WOP

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

65-0117339

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

AGUILA, RUFINO

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

18855 N.W. 79th Court

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33015

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**

[Handwritten Signature]

REGISTERED AGENT MUST SIGN

Date 6/22/2004

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
DP	RUFINO AGUILA	18855 N.W. 79th Court	Miami Florida 33015

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:

[Handwritten Signature]

6/22/2004

(305)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)

2052

Ref: Rufino Aguila, Corp
18155 N.W. 79th St.
Miami, Fla. 33015
Document # K 87154

Department of State
Reinstatement Section
Tallahassee, Fla.

Gentlemen: As per information received from your office regarding my corporation Annual report I want to inform that in 2003 I send my payment copy were attached, and I never got any letter informing that signature for R. Agent was missing, my mailing address is in the annual report form I send in 2003. Besides that I never received my 2004 Annual report, I am in business since 15 yrs ago with this corporation and this is the first time that I have this situation, I never got a prior letter or information for filing of 2004. Please waive my penalty and interest for such years, and help me in update my corporation I am requesting some business licenses, and I need my corporation active. Thanks for your help in this matter.

Sincerely,
