

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**CORPORATION  
REINSTATEMENT**



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

FILED  
02 APR 10 AM 9:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N0000000130V

1. Corporation Name

Sonido Internacional Cristiano, Inc.

2. Principal Office Address

5355 25<sup>th</sup> Ave. SW

Suite, Apt. #, etc.

City & State

Naples, FL

Zip

34116

Country

Collier

3. Mailing Office Address

5355 25<sup>th</sup> Ave SW

Suite, Apt. #, etc.

City & State

Naples  
Florida, FL

Zip

34116

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

2/29/02

5. FEI Number

☒ 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

Emely Pagan

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

5355 25<sup>th</sup> Ave SW

Suite, Apt. #, Etc.

City

Naples, FL 34116

State

FL

Zip Code

34116

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

Emely Pagan

Date 11-15-01

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
Pres	Herminio Pagan (D)	5355 25 <sup>th</sup> Ave SW	Naples, FL 34116
V Pres	Emely Pagan (D)	5355 25 <sup>th</sup> Ave SW	Naples FL 34116
Secy	Nedy Pagan (T)	5355 25 <sup>th</sup> Ave SW	Naples FL 34116

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:

*Herminio Pagan*

HERMINIO PAGAN

11-15-01

Date

(941) 455-2665

Daytime Phone #

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/00)

# **Sonido Intercional Cristiano**

(International Christian Sound)

Attachment,  
Do Not Remove

2

5355 25<sup>th</sup> Avenue SW, PH

Naples, Florida 34116

Home: (941) 455-2665

Fax: 455-5070

**FLORIDA DEPARTMENT OF STATE**  
Division of Corporations / Corporate Records  
P.O. Box 6327  
Tallahassee, Florida 32314

**December 3, 2001**

**Subject: Renewal Form**

**To whom it may concern:**

~~This letter serves as a follow-up of my telephone conversation with a customer service representative.~~ I called to inform that I had not received the renewal form for "Sonido Internacional Cristiano".

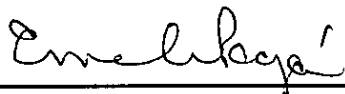
I questioned the address and when they told me, I informed customer service that the address they have in records was incomplete. The address was missing a sector in the area that I live. She placed the information and shortly after that I received the information by mail. We have four (4) areas with the same 25<sup>th</sup> Ave. Sw in Naples, Florida. I live in the private homes area. That's the reason why I haven't receive any mail from Tallahassee, Florida.

Please renew my corporation papers, and note the address correction.

Should you have any questiones, please feel free to contact me at the above number, and I will assist you. Once again, Thank you.

**AUTHORIZED SIGNATURE:**  
**Sonido Internacional Cristiano**

By: \_\_\_\_\_



**Emely Pagan**