

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 FEB 18 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

N02-1288

1. Corporation Name

Angel Society USA, INC.
Sociedad De Angeles
Universal Angel Society

500029379565
02/25/04--01015--015 **8.75

REINSTATEMENT 03-04

2. Principal Office Address

5401 N.W. 182 St.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33055

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02-21-2002

5. FEI Number

75-3016557

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

MARISA CARO

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

5401 N.W. 182 St.

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33055

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]

Date

01-19-04

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
D	CARO MARISA	5401 N.W. 182 St. Miami FL 33055	Miami FL 33055
PD	Rodriguez Leiza	2638 S.W. 31st Place	Miami FL 33133
TD	Martinez Elzy	6313 N.W. 20th Terrace	Hialeah FL 33015
SD	Xiomara Hernandez	3173 S.W. 27 St.	Miami FL 33133
D	Reinaldo Velazquez	5401 N.W. 182 St. #1	Miami FL 33055
VP	Oscar Flores	2750 W. 68 St	Hialeah Gardens FL 33016

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:

[Signature] MARISA CARO

01-19-04

786-344-7781

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

Attachment

**NO2000001288
Angel Society USA, Inc.
5401 N.W. 182 St.
Miami Fl. 33055**

December 31, 2003

**To: Florida Department of State
Division of Corporations**

REINSTATEMENT FEE WAIVE REQUEST

To Whom It May Concern:

This letter it is to certify that our company did not received the annual report.

We spoke to one representative and we explained the situation and we were advised to do this letter and to send a reinstatement application with the fee of \$61.25.

May you have any questions please feel free to contact us at (786) 344-7781.

Sincerely,


Marisa Caro, CEO ID