

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 APR 23 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N23305

1. Corporation Name

The American Society For the
Advancement of
Cantorial Arts, Inc.

2. Principal Office Address

407 Lincoln Road

Suite, Apt. #, etc.

9L

City & State

Miami Beach FL

Zip

33139

Country

USA

3. Mailing Office Address

407 Lincoln Road

Suite, Apt. #, etc.

9L

City & State

Miami Beach FL

Zip

33139

Country

USA

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

11/3/87

5. FEI Number

65-0020992

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

Ellen Rose, Esq., of Therrel Baisden, P.A.

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

1 S.E. 3rd Avenue

Suite, Apt. #, Etc.

2400

City

Miami

State

FL

Zip Code

33131

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

Ellen Rose

REGISTERED AGENT MUST SIGN

Date

4-20-01

9. Names and Street Addresses of Each Officer and/or Director (Florida non-profit 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 | Haim Wiener | 5718 N. Bay Road Miami Beach, FL | 33140 Miami Bch, FL |
| SDV | Gila Wiener | 5718 N. Bay Road | 33140 Miami Bch, FL |
| NASD | Dania Mark | 34131 SW St. Street | 33312 Ft. Lauderdale, FL |
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REINSTATEMENT 00-048

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 application are true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Dania Mark

DANIA MARK

4/18/01

Date

(305) 538-6070

Daytime Phone #