PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

99 MAR 11 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N 44517

1. Corporation Name
Festival Ritmo del Caribe, Inc.
Caribbean Rhythm Festival, Inc.

Principal Place of Business	Mailing Address
1712 W. Martin L.K. Blvd.	P.O. Box 4287
Tampa, FL. 33607	Tampa, FL. 33677

REINSTATEMENT 94-99

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
1712 W Martin LK Jr. Blvd	P.O Box 4287
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa Fl.	City & State: Tampa Fl.
Zip: 33607 Country: USA	Zip: 33677 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 7-31-91

5. FEI Number: 59-3151227 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☒ — $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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Jose A. Santiago D	1710 W. Martin Luther King tampa fl. 33607	tampa fl. 33607
D	Carmen A. Emanuelli D	3104 W. Osborne Ave.	tampa fl. 33614
D	Ernesto Aquino D	3104 W. Osborne Ave.	tampa fl. 33614
T	William Peña T	4536 Minehaha St.	tampa fl. 33614

03/24/99-01084-005
$$$51.25 $$$51.25

8. Name and Address of Current Registered Agent

$

9. Name and Address of New Registered Agent

Name: Carmen A. Emanuelli
Street Address (P.O. Box Number is Not Acceptable): 3104 W. Osborne Ave.
Suite, Apt. #, Etc.
City: Tampa | State: FL | Zip Code: 33614

CR2E08R (12/98)

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: Carmen A. Emanuelli
REGISTERED AGENT MUST SIGN
Date: 2-22-99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒

3-15-99
(See other side for information on intangible tax.)

12. 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: Jose A. Santiago - Pres. — 2-22-99 — (813) 876-7400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #