

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 DEC 26 AM 8:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N 990000030W

1. Corporation Name

ETHNIC MUSIC AND THEATRICAL  
SOCIETY, INC

2. Principal Office Address

8850 NW 17th ST

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

PLANTATION FL

City & State

Zip

33322

Country

US

Zip

Country

REINSTATEMENT 03

4. Date Incorporated or Qualified  
To Do Business in Florida

5-18-99

5. FEI Number

65-091875

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

ALEXANDER, MATOS

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

8850 NW 17th ST

Suite, Apt. #, Etc.

City

PLANTATION

State  
FL

Zip Code

33322

500025761355

12/26/03 01006 025 \*\*74.00

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

X *Alexander Matos*

Date

12/19/03

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	ALEXANDER MATOS	8850 NW 17th ST	PLANTATION, FL 33322
D	BERNICE MATOS	8850 NW 17th ST	PLANTATION, FL 33322
D	DEBRA MATOS	10532 NW 10th CT	PLANTATION, FL 33322

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:

X *Alexander Matos* ALEXANDER MATOS

Date

12/19/03 9544728852

Daytime Phone #

DECEMBER 20,2003

FLORIDA DEPARTMENT OF STATE

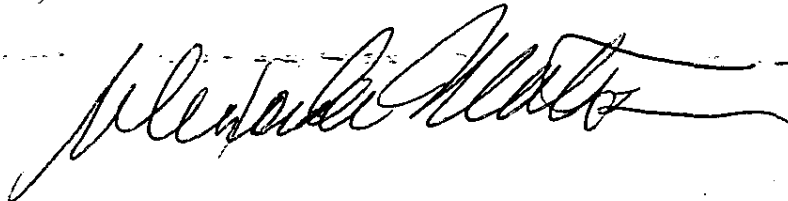
GENTLEMEN:

ENCLOSED PLEASE FIND THE ANNUAL REPORT FORMS FOR ETHNIC MUSIC AND THEATRICAL SOCIETY, INC.. THE ORIGINAL FORMS WERE NEVER RECEIVED IN JANUARY. WE CHANGED ADDRESS OF THE CORPORATION AND DID NOT RECEIVE THE FORM

WE HAVE ENCLOSED A CHECK FOR \$ 70.00 FOR THE YEAR 2003. KINDLY ACCEPT THESE WITHOUT PENALTY UNDER THE CIRCUMSTANCES, DUE TO THE FACT THAT THE ANNUAL REPORTS WERE NEVER RECEIVED

THANK YOU FOR YOUR COOPERATION

YOURS TRULY,

A handwritten signature in black ink, appearing to read "Michael A. H. H. H.", with a stylized flourish at the end.