

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 OCT -6 PM 12:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P00000012081**

**1. Corporation Name**

KAYA ACQUISITION, INC

P.O. BOX 520271

P.O. BOX 520271

**WOM-39022**

**2. Principal Office Address**

P.O. BOX 520271

**3. Mailing Office Address**

P.O. BOX 520271

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33152

Country

U.S.A

Zip

33152

Country

U.S.A

**4. Date Incorporated or Qualified**

To Do Business in Florida **01/31/2000**

**5. FEI Number**

**65-0991659**

☒ 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

EDOUARD JOSEPH

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

13311 SW 88 TERRACE

Suite, Apt. #, Etc.

A

City

MIAMI

State

FL

Zip Code

33186

**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

REGISTERED AGENT MUST SIGN

Date **09/30/04**

**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
CEO	ALEXANDER ZAMBRANO	P.O. BOX 520271	MIAMI, FLORIDA 33152

**700041640787**  
10/06/04--01035--003 \*\*300.00

**Prof**

**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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/30/04

Date

786-255-6726

Daytime Phone #

CR2081 (01/04)

9/30/04

Dear Dept. of State,

I am writing today in regards to my company KAYA Acquisition INC.

I did not receive my 1st nor second notice for my annual report and therefore ask that you please waive the \$600.00 re-instatement fee.

I have attached the re-instatement form along with my \$300.00 check.

Regards.

Alexander Zamboni.