

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 FEB -1 AM 11:18

DOCUMENT # P00000037624

1. Corporation Name

CHINESE MARTIAL ARTS, INC.

Principal Place of Business

Mailing Address

1820 JAMES AVENUE

2-B

MIAMI BEACH FL 33139

1820 JAMES AVENUE

2-B

MIAMI BEACH FL 33139



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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

04/14/2000

5. FEI Number

65-1007492

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 3	City / State / Zip 4
D	TARRAGO, ELIO	3425 COLLINS AVE #927 14736 SW 56TH STREET	MIAMI BEACH FL 33140 MIAMI - FL 33185
D	TARRAGO, EUGENIA	3425 COLLINS AVE #927 14736 SW 56TH STREET	MIAMI BEACH FL 33140 MIAMI - FL 33185

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

VALIDO, FELIX M

1820 JAMES AVENUE

2-B

MIAMI BEACH FL 33139

Name

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

Suite, Apt. #; Etc.

City

State
FL

Zip Code

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

[Signature]
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

1/25/02

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/01)

CHINESE MARTIAL ARTS, INC
1870 JAMES AVENUE - 2B
MIAMI BEACH - FL 33139

January 25, 2002

To whom it may concern:

Please be advised
that we never receipted your rejection
letter dated 5/22/01.

Very truly yours

