

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000041151

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1. Corporation Name

STARLIGHT USA GROUP, CORP.

Principal Place of Business

Mailing Address

C/O ROTH ROUSSO & BENJAMIN PA  
9350 SOUTH DIXIE HWY PH 2  
MIAMI FL 33156

C/O ROTH ROUSSO & BENJAMIN PA  
9350 SOUTH DIXIE HWY PH 2  
MIAMI FL 33156



REINSTATEMENT B 01

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

2. New Principal Office Address, If Applicable

3440 HOLLYWOOD BLVD

Suite, Apt. #, etc.

STE 360

City & State

HOLLYWOOD, FL

Zip 33021

Country

U.S.A.

3. New Mailing Office Address, If Applicable

3440 HOLLYWOOD BLVD

Suite, Apt. #, etc.

STE 360

City & State

HOLLYWOOD, FL

Zip 33021

Country

U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida

04/25/2000

5. FEI Number

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPVT	BIANCHI, HECTOR HUGO	PHW, 9350 S DIXIE HWY	MIAMI FL 33156
S	BIANCHI, HECTOR HUGO	PHW, 9350 S DIXIE HWY	MIAMI FL 33156
DPVT	BIANCHI, HECTOR HUGO	3440 HOLLYWOOD BLVD, STE 360	HOLLYWOOD, FL 33021
S	BIANCHI, HECTOR HUGO	3440 HOLLYWOOD BLVD, STE 360	HOLLYWOOD, FL 33021
			000004703130--7 -12/04/01--01005--001 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

ROTH, LEONARDO A ESQ  
C/O ROTH ROUSSO & BENJAMIN PA  
9350 SOUTH DIXIE HWY PH 2  
MIAMI FL 33156

9. Name and Address of New Registered Agent

Name

LEONARDO A. ROTH, ESQ

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

3440 HOLLYWOOD BLVD.

Suite, Apt. #, Etc.

360

City

HOLLYWOOD

State

FL

Zip Code

33021

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

*Leonardo A. Roth*

Date

11-8-01

REGISTERED AGENT MUST SIGN

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HECTOR BIANCHI (D.P.V.T) 11-8-01

Date

Daytime Phone #

954-322-4280

CR2E040 (8/01)