

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

182

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 NOV 19 AM 10:55

DOCUMENT # P00000053319

1. Corporation Name

REAL SMART SYSTEMS WEB PRODUCTIONS, INC.

200
48R

2. Principal Office Address
19098 NE 4TH CT.

3. Mailing Office Address
19098 NE 4TH CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI, FLORIDA

MIAMI, FLORIDA

Zip Country
33179 DADE

Zip Country
33179 DADE

4. Date Incorporated or Qualified
To Do Business in Florida

6/02/2000

5. FEI Number
65-1011902

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

SPIEGEL & UTRERA, P.A.

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

343 ALMERIA AVENUE

Suite, Apt. #, Etc.

City

CORAL GABLES

State
FL

Zip Code
33134

400004786864-4
-12/05/01--01080-012
****150.00 ****150.00

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

Date

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
PRES	ANDRE L. MARTINS	220 71 STREET, #216	MIAMI BEACH, FL 33141
VP	RICARDO SERPA	220 71 STREET, #216	MIAMI BEACH, FL 33141

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

RICARDO SERPA

Date

11/8/01

Daytime Phone #

CP2ED01 (9/00)



THEISS, LIPNER & Co., LLP
Certified Public Accountants
420 LINCOLN ROAD • SUITE 412B
MIAMI BEACH, FLORIDA 33139

2 of 2
TELEPHONE: (305) 535-0950

FAX: (305) 535-8916

TOLL FREE: (877) 300-6787

November 6, 2001

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Real Smart Systems Web Productions, Inc.
65-1011902
Document # P00000053319

Gentlemen/Ladies:

Enclosed is an Application for Reinstatement by the taxpayer.

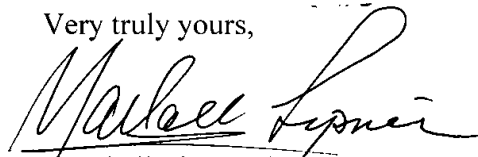
The taxpayer has advised us that they never received their 2001 Corporation Annual Report/Uniform Business Report Form.

We are enclosing herewith the taxpayer's check in the amount of \$150.00.

The taxpayer is a small business corporation. He has not taken a salary from his corporation since the incorporation in June of 2000.

Thank you for giving this matter your careful consideration.

Very truly yours,


Marshall Lipner, CPA

Enclosures
ML:bj