

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

03 MAY -1 PM 3:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P00000058347

1 Corporation Name

CAYAYO INC.

600018568756  
05/08/03--01065--025 \*\*1050.00

**REINSTATEMENT 01-03**

2 Principal Office Address  
6500 NW 82 AVE

3 Mailing Office Address  
SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
MIAMI, FL.

City & State

Zip Country  
33166 USA

Zip Country

4 Date Incorporated or Qualified To Do Business in Florida 9 June 2000

5 FEI Number  
65-1023756

Applied For  
Not Applicable

6 CERTIFICATE OF STATUS DESIRED

**7 Name and Address of Current Registered Agent**

Name CELIA VILLAFANA

Street Address (P.O. Box Number is Not Acceptable)  
6500 NW 82 AVE

Suite, Apt. #, Etc.

City MIAMI

State Zip Code  
FL 33166

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 Celia Villafana

Date 24 April 2003

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
P/S	CELIA VILLAFANA	6500 NW 82 AVE	MIAMI, FL 33166
V	EULOGIO VILLENA	6500 NW 82 AVE	MIAMI, FL 33166
T	MARTA E. VILLENA	6500 NW 82 AVE	MIAMI, FL 33166

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)(f), 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 Celia Villafana

Date 24 April 2003

Daytime Phone # 805-593-0859

SIGNATURE OF REGISTERED AGENT OR SECRETARY OF STATE

Date Daytime Phone #

jsk

CAYAYO INC.  
6500 NW 82 AVE  
MIAMI, FL. 33166

24 April 2003

Department of State  
Division of Corporation  
409 East Gaines St  
Tallahassee, Fl. 32399

P00000058347  
FEI# 65-1023756

Sir/Madam

Enclosed please find check # 1165 in the amount of \$1050.00 for the above mentioned corporation. I did not received the UBR for the year 2001 and on. This check is to cover reinstatement fee. Please waive any other fees that might be as it was not my intention not to file the report,

This check is to cover :

Reinstatement fee	\$ 600.00
Annual Rep. Fee 2001,2002	122.50
Corp. Supplemental Fee	177.50
2003 UBR filing	150.00
total	<u>\$ 1050.00</u>

Please make sure of any error in my address.

Thank you for your help.

Cayayo Inc.  
6500 N.W. 82 Ave  
Miami, Fl. 33166

Celia Villafana  
Pres.

