

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

DOCUMENT # P00000071748

02 DEC 23 PM 4:21

1. Corporation Name

FIRMEZA MUSIC CORP.

SECRETARY OF STATE  
TALLAHASSEE, FL 32399-0001  
600009634586  
12/23/02--01042--016 \*\*150.00

Principal Place of Business

16896 SW 1ST PLACE  
PEMBROKE PINES FL 33027

Mailing Address

16896 SW 1ST PLACE  
PEMBROKE PINES FL 33027



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

07/27/2000

5. FEI Number

65-1028425

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

D

RIVERA, BENJAMIN

16896 SW 1ST PLACE

PEMBROKE PINES FL 33027

D

VELEZ, BERNICE

16896 SW 1ST PLACE

PEMBROKE PINES FL 33027

8. Name and Address of Current Registered Agent

RIVERA, BENJAMIN

16896 SW 1ST PLACE

PEMBROKE PINES FL 33027

9. Name and Address of New Registered Agent

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

Dec. 5, 2002

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 #

Dec. 5, 2002

CR2E040 (8/02)



16896 SW 1<sup>st</sup> Place Pembroke Pines, FL. 33027  
Phone 954 431 0441 Fax 954 431 3727 e-mail  
firmeza@firmeza.com

2 of 2

December 5, 2002

Division of Corporations  
Annual Report / Reinstatement Section  
Tallahassee, FL.

Re: Firmeza Music Corp., FEI Number 65-1028425

To Whom It May Concern:

We are requesting the reinstatement of our corporation. We are requesting to be waived of the reinstatement fee because we never received any uniform business report (UBR) notices.

Attached is the application for reinstatement and the UBR filing fee.

Sincerely,

A handwritten signature in black ink, appearing to read "B. Rivera", written over a horizontal line.

Benjamín Rivera  
President  
Firmeza Music Corp.