

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 AUG 30 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000075040

1. Corporation Name

RODENA PRODUCTIONS, INC.

814 TEALWOOD DRIVE
814 TEALWOOD DRIVE

2. Principal Office Address

814 TEALWOOD DRIVE

3. Mailing Office Address

814 TEALWOOD DRIVE

Suite, Apt. #, etc.

101

Suite, Apt. #, etc.

101

City & State

BRANDON, FL

City & State

BRANDON, FL

Zip

33510

Country

USA

Zip

33510

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 08/08/2000

5. FEI Number

65-7042369

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 03-04

7. Name and Address of Current Registered Agent

Name

JOSE RODENA

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

814 TEALWOOD DRIVE

Suite, Apt. #, Etc.

APT 101

City

BRANDON

State
FL

Zip Code
33510

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

Jose Rodena

REGISTERED AGENT MUST SIGN

Date 08/27/2004

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/D	JOSE RODENA	814 TEALWOOD DRIVE, APT 101	BRANDON, FL 33510
S/T/D	YOLANDA C. PEREZ	1151 N.E. 196 STREET	MIAMI, FL 33179

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:

Jose Rodena

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/27/2004

Date

786-246-4159

Daytime Phone #

CR2E081 (01/04)



Stanley I. Foodman

Certified Public Accountant

Certified Fraud Examiner

2022

August 17, 2004

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

Re: Rodena Productions, Inc.

To Whom It May Concern:

Please accept the accompanying reinstatement form and fee in the amount of \$300.00. The Company requests abatement of the penalty for late filing. It never received its original Uniform Business Report.

Sincerely

I attest that the above is a true and correct statement.

Jose Rodena, President
Rodena Productions, Inc.

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800.636.0291
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