

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 OCT 28 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000096283

1. Corporation Name

SOCCER PEREA FC, INC.

2. Principal Office Address

7527 SW 112 PL.

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33173

Country

US

3. Mailing Office Address

7527 SW 112 PL.

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33173

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

10-12-2000

5. FEI Number

51-0429972

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

LUIS CARLOS PEREA

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

7527 SW 112 PL.

Suite, Apt. #, Etc.

City

MIAMI

State
FL

Zip Code

33173

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

REGISTERED AGENT MUST SIGN

Date **9-17-02**

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	LUIS CARLOS PEREA	7527 SW 122 PL.	MIAMI, FL. 33173

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:

LUIS CARLOS PEREA

9-17-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (8/01)

9/11/02

SOCCKER PEREA FC, INC., INC.
DOC. # P96000005044

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I SPOKE TO YOUR OFFICE AND I WAS ADVISED TO SEND IN A REINSTATEMENT FORM ALONG WITH A COPY OF THE CHECK I PAID FOR LAST YEARS UBR I AM ALSO SENDING A CHECK TO COVER THE 2002 UBR FEE.. I WOULD LIKE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.



CORDIALEY
LUIS CARLOS PEREA
PRESIDENT

Robinson Accounting of America

10/25/02


FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

To Whom It May Concern,

This letter is to inform you that Mickle's Enterprises Inc., has relocated. The named Corporation did not receive a Annual Corporate Report. The officers of the Corporation was under the guidance of their previous accountant, who failed to properly inform them that this report should have been filed. Due to these circumstances we are asking that you abate the reinstatement fees. If there are any questions you can contact me at (407) 541-0705.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,


Mr. Robinson
Robinson Accounting

