

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 18 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000001875

1. Corporation Name

SPECTRA DIAMOND PRODUCTS, INC.

Principal Place of Business

2605 N. MIAMI AVE
MIAMI FL 33127

Mailing Address

1408 BRICKELL BAY DRIVE, #1018
MIAMI FL 33131



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

2. New Principal Office Address, If Applicable

5596 NW 161st St.

Suite, Apt. #, etc.

Hialeah, FL 33014

City & State

3. New Mailing Office Address, If Applicable

3140 S. Ocean Dr., #501

Suite, Apt. #, etc.

Hallandale Beach

City & State

Zip

33014

Country

Zip

33009

Country

REINSTATEMENT 03

Reinstated or Qualified
To Do Business in Florida

01/04/2001

5. FEI Number

65-1065904

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)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director	4. City / State / Zip
D	JOSE ALVA, ANTONIO	3140 S. OCEAN DRIVE, #501	HALLANDALE BEACH FL 33009
VP	GLADYS ALVA	3140 S. Ocean Drive, #501	
SEC	GIOVANNI FARINA	Modena, Italy	100024381161 11/03/03--01068--016 **150.00

8. Name and Address of Current Registered Agent

ALVA, JOSE ANTONIO
3140 S. OCEAN DRIVE, #501
HALLANDALE BEACH FL 33009

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

REGISTERED AGENT MUST SIGN

Date

10/30/03

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jose Alva

11/14/03

Date

305 812 2582

Daytime Phone #

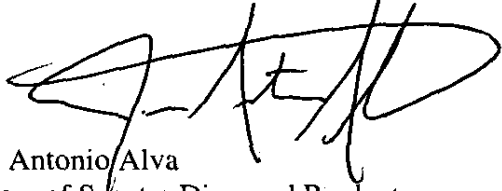
CR2040 (7/03)

Spectra Diamond Products
5596 NW 161st
Miami, FL 33014

October 29, 2003

Florida Department of State
Glenda E. Hood
Secretary of State
Division of Corporations

This letter is to inform you that I am attaching a check for \$150 along with the completed UBR for 2003. I am requesting reinstatement and a waiver of the penalty because I did not receive any prior UBR notices in 2003. My business did have a change of address in 2003. This change may have caused notices getting lost in the mail system.

A handwritten signature in black ink, appearing to read 'J. Alva', with a large, stylized flourish at the end.

Jose Antonio Alva
Officer of Spectra Diamond Products