

APPLICATION FOR REINSTATEMENT  
FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P01000025879

1. Corporation Name

Miami New Media, Inc.

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified 3/12/2001  
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 19101 Mystic Pointe Drive

26 19101 Mystic Pointe Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #1503

27 #1503

City & State

City & State

23 Aventura FL

28 Aventura FL

Zip

County

Zip

County

24 33180

25 Dade

29 33180

30 Dade

4. FEI Number

65-1082327

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution ☐

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Corporate Creations Network Inc.

941 Fourth Street #200

Miami Beach, FL 33139

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE Director / President / Secretary ☐ DELETE  
NAME Thomas F. Knapp  
STREET ADDRESS 19101 Mystic Pointe Drive #1503  
CITY-ST-ZIP Aventura FL 33180

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
000012329580  
02/12/03--01011--011 \*\*300.00

TITLE Director / Vice Pres. / Treasurer ☐ DELETE  
NAME Mohammed Syed  
STREET ADDRESS 19101 Mystic Pointe Drive #1503  
CITY-ST-ZIP Aventura FL 33180

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, or on an amendment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas F. Knapp, Director / President

Date

Daytime Phone #

FILED

03 JAN 15 PM 3:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12/7/02 305-682-1402

2012

Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Miami New Media, Inc.

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. \$300.00 check payable to Florida Department of State

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By: 

by L.A. Oriante as attorney-in-fact

Name: Thomas F. Knapp

Title: President

Date: 1/14/2003