

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 JUN -4 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000073484

1. Corporation Name

EDITORIAL MTC, INC.

2. Principal Office Address

3124 S.W. 139th Place

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33175

Country

3. Mailing Office Address

3124 S.W. 139th Place

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33175

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/25/2001

5. FEI Number

65-1127602

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

700020513847
06/04/03--01030--004 **150.00

7. Name and Address of Current Registered Agent

Name

Pedro C. Donates

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

3971 S.W. 8th Street

Suite, Apt. #, Etc.

Suite # 206

City

Miami

State
FL

Zip Code
33134

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

X

REGISTERED AGENT MUST SIGN

Date

06/02/03

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
PD	Encinosa, Enrique G.	3124 S.W. 139th Place	Miami, Florida 33175
VDT	Encinosa, Iliia Rosa	3124 S.W. 139th Place	Miami, Florida 33175

TS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/02/03

Date

Daytime Phone #



THE ACCOUNTING & TAX COMPANY, INC.

* Coral Gables *

* Hollywood *

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June 2, 2003

**Florida Department of State
Division of Corporations
Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314**

RE: SUBJECT: *Editorial MTC, Inc.*
REFERENCE #: *P01000073484*
FEI No.: *65-1127602*
FORM: *REINSTATEMENT - UBR 2003*

Dear Sirs:

Please be advised that enclosed is a completed Corporation Reinstatement for the above mentioned corporation. The required Uniform Business Report was not filed because we never received the pre-printed UBR 2003 format. When we contacted your office we were instructed to write this letter stating the above reason and include it with the Corporation Reinstatement form and fee of \$150.00.

If there should be any questions or problems, we would appreciate you contacting us.

Sincerely yours,

Pedro C. Donates
Registered Agent for Editorial MTC, Inc.

3971 S.W. 8th Street, Suite 206
Coral Gables, FL 33134
(305) 461-0047
(305) 461-0049

1933 Pembroke Road
Hollywood, FL 33120
(954) 922-8603
Fax (954) 922-8604