

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 AUG 16 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 01 0000 772 99

1. Corporation Name

MODERN AMERICAN GLOBAL
INVESTORS CORPORATION

2. Principal Office Address

645, N.W. 50 ST.

Suite, Apt. #, etc.

±

City & State

MIAMI, FLORIDA

Zip

33127

Country

U.S.A.

3. Mailing Office Address

P.O. Box 612316

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

Zip

33261

Country

U.S.A.

REINSTATEMENT 02-04

4. Date Incorporated or Qualified
To Do Business in Florida

8-2-2001

5. FEI Number

65-1129677

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

TONY MUNIS

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

645, N.W. 50 STREET

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33127

700040210707

08/16/04--01023--002 **451.00

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

Tony Munis
REGISTERED AGENT MUST SIGN

Date 8-4-2004

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
CEO	TONY MUNIS	645, N.W. 50 ST.	MIAMI, FL, 33127
SEC.	THERESIA MUNIS	645, N.W. 50 ST.	MIAMI, FL, 33127
D	PATRICK ATIBA	17100 N.W. 12, AV	MIAMI, FL, 33169

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:

Tony Munis TONY MUNIS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-4-04

Date

786-285-3783

Daytime Phone #

CR2E081 (01/04)

2 of 2

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 6, 2004

The Florida Department of State
Division of Corporation
PO Box 6327
Tallahassee, FL 32314

To whom it may concern:

I did not receive the filing papers for the year 2000~~2~~

Sincerely,


Tony Munis
645 NW 50th Street
Miami, FL 33127

Enclosures