

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT 23 AM 8:00

DOCUMENT #

PD1000121745

1. Corporation Name

Internet Vision, Inc.

**REINSTATEMENT 03**

600024029276

10/23/03--01013--003 \*\*150.00

*MR*

2. Principal Office Address

114 NW 109 Ave

3. Mailing Office Address

114 NW 109 Ave

Suite, Apt. #, etc.

306

Suite, Apt. #, etc.

306

City & State

Pembroke Pines, Florida

City & State

Pembroke Pines, Florida

Zip

33026

Country

USA

Zip

33026

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

1-2-2002

5. FEI Number

01-0552231

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

Damien Alvarez

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

114 NW 109 Ave

Suite, Apt. #, Etc.

306

City

Pembroke Pines, Florida

State  
FL

Zip Code  
33026

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

Date 10-20-2003

REGISTERED AGENT MUST SIGN

**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
Pres	Damien Alvarez	114 NW 109 Ave #306	Pembroke Pines, Florida, 33026

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:

Damien Alvarez

10-20-2003 305-509-4045

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E031 (10/02)

**Internet Vision, Inc.**

114 NW 109 Ave, # 306 Pembroke Pines, Florida, 33026

Tel: 305-509-4045 Email: [dee18702@msn.com](mailto:dee18702@msn.com)

10/21/2003

To Whom It May Concern:

As per our telephone conversation enclosed please find a check for \$150 to reinstate my corporation Internet Vision, Inc.

Please note that the prior address on record was incorrect and was the reason why I was late in completing my filings. I never received the papers for me to complete my filings on time.

Sincerely yours,

Damien Alvarez  
President.