

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 SEP 23 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000002144**

1. Corporation Name

Espresso Bibliografico Inc.

2. Principal Office Address

80 SW 8 Street

Suite, Apt. #, etc.

Suite #2000

City & State

Miami FL

Zip

33130

Country

USA

3. Mailing Office Address

3686 Estepona Ave.

Suite, Apt. #, etc.

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City & State

Doral FL

Zip

33178

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

1/7/2002

5. FEI Number

020532516

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

Alphonse Morgan

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

80 SW 8 Street

Suite, Apt. #, Etc.

Suite #2000

City

Miami

State

FL

Zip Code

33130

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

Alphonse Morgan

REGISTERED AGENT MUST SIGN

Date

6/3/04

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
P	Alphonse Morgan	3686 Estepona Ave	Doral FL 33178

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:

Alphonse Morgan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(305) 470 2222

Daytime Phone #

CR2001 (01/04)



2022

EXPRESSO BOOKS INC.

Thursday, June 03, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Please wave the reinstatement fee for Espresso Bibliografico dba Espresso Books Document Number P02000002144 as we did not receive the yearly annual report form for 2003.

We are enclosing the Corporation Reinstatement form and a check for \$150

We appreciate it very much for your kind help in this matter.

Sincerely,



Al Morgan