

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 31 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000057142

1. Corporation Name

MTS ADVERTISING, INC.

Principal Place of Business

Mailing Address

2815 SW 24 TERR
MIAMI FL 33145

2815 SW 24 TERR
MIAMI FL 33145



REINSTATEMENT

03

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

05/22/2002

Suite, Apt. #, etc

Suite, Apt. #, etc

2825 SW 25 street

2825 SW 25 st

City & State
Miami, Florida

City & State
Miami, Florida

Zip
33133

Country
Dade

Zip
33133

Country
Dade

5. FEI Number

02-0618812

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PCEO	MATUS, NANCY	2815 SW 24 TERR	MIAMI FL 33145
T	MATUS, NANCY	2815 SW 24 TERR	MIAMI FL 33145
D	RODRIGUEZ, CLIFTON H CPA	3146 NW 68 ST	FT LAUDERDALE FL 33309
D	Matus, Nancy	2825 SW 25 street	MIAMI, FL 33133

8. Name and Address of Current Registered Agent

MATUS, NANCY
2815 SW 24 TERR
MIAMI FL 33145

9. Name and Address of New Registered Agent

Name

Nancy Matus

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

2825 SW 25 street

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33133

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]

Date

10-21-03

REGISTERED AGENT MUST SIGN

11. 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-21-03

Date

305-569-0940

Daytime Phone #

CR2E040 (7/03)

MTS ADVERTISING INC.,

2825 SW 25 STREET, MIAMI, FLORIDA 33133 * 305-569-0940

October 23, 2003

DIVISION OF CORPORATIONS
ANNUAL REPORT/REINSTATEMENT SECTION
PO BOX 6327
TALLAHASSEE, FL 32314-6327

RE: REINSTATEMENT FEE WAIVE REQUEST/ FOR MTS ADVERTISING
INC.,

To Whom It May Concern:

The purpose of this letter is to hereby state that I, Nancy Matus, PCEO, for MTS ADVERTISING INC., did not receive the two prior UBR Notices for the year 2003. Please waive the reinstatement fee and find enclosed payment for the amount of \$ 150.00 and keep the status of Our Corporation active. If you should have any questions regarding this matter please do not hesitate to contact me at your earliest convenience.

Sincerely,



Nancy Matus
PCEO/MTS ADVERTISING INC.,
305-569-0940

Enclosures: Application for Reinstatement