

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT -3 AM 8:21

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 002000070289

1. Corporation Name

BEBE PRODUCTIONS, INC.

2. Principal Office Address

1784 W. FLAGLER ST.

3. Mailing Office Address

SAME.

Suite, Apt. #, etc.

SUITE 14

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

Zip

33135

Country

US.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/20/2002

5. FEI Number

43-1972799

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

MIGUEL BORROTO

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

1784 W. FLAGLER ST

800023669068

10/09/03--01065--005 **150.00

Suite, Apt. #, Etc.

SUITE 14.

City

MIAMI

State

FL

Zip Code

33155

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

09/29/2003

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
D-P S-T	MIGUEL BORROTO	1784 W. FLAGLER ST.	MIAMI, FL 33135.

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)(l), 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

Date

09/29/2003

Daytime Phone #

CR2E031 (10/02)

7/10/13

BEBE PRODUCTIONS, INC.

1784 W. Flagler Street – Suite 14

Miami, Florida 33135

Telephone (786) 357-1528

September 29, 2003

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

Re: Bebe Productions, Inc. – Reinstatement for the year 2003

Dear Sir or Madam:

I incorporated Bebe Prodoctions, Inc. in October 2002 and did not start operations until two months ago.

Because I moved two times since October, 2002 (the original address of the corporation was my house), it seems that the corporate papers sent to me by your department were lost. I did not know that I had to pay an annual registration fee. My accountant just informed that the fee has to be paid every year.

I would appreciate if you would waive the penalty charges in respect to the reinstatement of my corporation.

I am enclosing a check in the amount of \$150.00 hoping that the penalty waive is done.

Thank you very much for your kind consideration.

Sincerely,

Miguel Borroto
President

