

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 NOV 24 AM 10:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000108057

1. Corporation Name

Soul Lounge Entertainment  
Inc.

**REINSTATEMENT** 03

000024980610  
11/24/03--01088--012 \*\*150.00

2. Principal Office Address

4720 SW 74th Ave

Suite, Apt. #, etc.

3. Mailing Office Address

4720 SW 74th Ave

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

33155 FL

Zip

33155

Country

USA

Zip

33155

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

11/01/02

5. FEI Number

90-0054491

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

Ricardo Barea

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

7141 Lago Drive East

Suite, Apt. #, Etc.

City

Miami, FL

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

[Signature]  
REGISTERED AGENT MUST SIGN

Date

11/20/03

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
Preside.	<u>Ricardo Barea</u>	<u>7141 Lago Drive East</u>	<u>Miami, FL 33155</u>

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:

[Signature]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/20/03  
Date

305-439-4892  
Daytime Phone #

CR2E081 (10/02)

# SOUL . LOUNGE . ENTERTAINMENT., INC.

TO: Dept. of State

FR: Ricardo Barea  
Soul Lounge Entertainment  
4720 sw 74<sup>th</sup> avenue  
Miami, fl 33155

We did not receive by mail the renewal forms for this year and would appreciate if you could process this reinstatement form at the regular 150.00 fee. Thank you for your understanding and we look forward to renewing our forms next year.

Sincerely,

Ricardo Barea