

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000114972

1. Entity Name

MEDIA@IZ.NET



FILED

03 OCT 28 AM 9:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

USA

3. Mailing Address

741 SE 5 PLACE

Suite, Apt. #, etc.

Home

Suite, Apt. #, etc.

Home

City & State

HIALEAH-FLORIDA HIALEAH-FLORIDA

Zip

33010

Country

USA

Zip

33010

Country

USA

**REINSTATEMENT**

03

DO NOT WRITE IN THIS SPACE

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

JOSE BARCENA

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

741 SE 5th PLACE

City

HIALEAH

FL

Zip Code 33010

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

9/13/03  
DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PRESIDENT  
NAME JOSE A. BARCENA  
STREET ADDRESS 741 SE 5 PLACE HIALEAH FL  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
200024198342  
10/28/03--01038--002 \*\*150.00

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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE A. BARCENA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/25/2003 305-883-9516  
Date Daytime Phone #

July 30, 2003

Uniform Business Report  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Re: Annual Report Reinstatement

To whom it may concern:

Enclosed please find the Uniform Business Report for Media Giz. Inc. Doc. # P02000114972. Please consider this letter my written request to have the reinstatement fees abated. I never received the Uniform Business Report and was not aware that it was never filled, as you can see this company is new. I have enclosed a registration fee of \$150.00 along with the application.

If you need any additional information please contact me at your convenience.

Thanking you in advance.

Sincerely,

Jose A. Barcena

Enclosures:

Uniform Business Report