

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000042071

**FILED
Oct 26, 2004
Secretary of State**

Entity Name: TY-SUM TALENT AGENCY, INC.

Current Principal Place of Business:

246 NW 183RD STREET
MIAMI, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

17940 NW 16TH AVENUE
MIAMI, FL 33169 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MILLINER, RAMONA
17940 NW 16TH AVENUE
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILLINER, RAMONA
Address: 17940 NW 16TH AVENUE
City-St-Zip: MIAMI, FL 33169 US

Title: V () Delete
Name: SHELBY, LATOYA
Address: 17940 NW 16TH AVENUE
City-St-Zip: MIAMI, FL 33169 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMONA MILLINER

P

10/26/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date