

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 OCT 30 PM 4:47

DOCUMENT # P03000068683

1. Corporation Name

Mothersystem Import & Export Corp.

2. Principal Office Address

3900 NW 79 Ave

Suite, Apt. #, etc.

632

City & State

MIAMI

FL

Zip

33166

Country

USA

3. Mailing Office Address

3900 NW 79 Ave

Suite, Apt. #, etc.

632

City & State

MIAMI

FL

Zip

33166

Country

USA

REINSTATEMENT 05-06

4. Date Incorporated or Qualified
To Do Business in Florida

6/20/03

5. FEI Number

650936836

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

Henry Betancur

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

3900 NW 79 Ave

Suite, Apt. #, Etc.

632

City

MIAMI

State

FL

Zip Code

33166

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

Henry Betancur

Date

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
P	Henry Betancur	3900 NW 79 Ave suite 632	MIAMI, FL 33166

500081614455
11/08/06--01008--015 **300.00

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:

Henry Betancur
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/27/06

Date

Daytime Phone #

Florida Dept. of state
Annual Report Dept.

As per our conversation I'm sending \$300.⁰⁰ for my
Annual Report, since I never received the report. I
had notify your office of my address change
and it seems that it was never changed.
I thank you in advance for the waive of the
late fee.

Mothersystem Import & Export Corp.
Document Number P03400068683

Thank you ✓

Henry Betancur
HENRY BETANCUR.