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## 2005 FOR PROFIT CORPORATION REINSTATEMENT

MANUEL AND STATUS STATU	DOCUMENT # P03000109646  1. Entity Name TELECAMARA PRODUCTIONS VJ91, INC.						05 FEB -1		-	
Subse, Apt. 14, etc.						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
## PTD   Company   PTD   Company   PTD   Company   PTD   PTD   Company   PTD	4716	NW 102 Street	9716 NW 102 Steel							
SP3 7 2 Country S S Constituted Status Desired Status Desired Sea 7.75 Academoral Fee Required  8. Name and Address of Current Registered Agent  7. Name and Address of Name Registered Agent  7. Name Address of Name Registered Agent  7. Name Address of Name Registered Agent  7. Name Registered Agent  7. Name Registered Agent  7. Name Registered Agent  7. Name Address of Name Registered Agent  7. Name Registered Agent  8. Name Registered Agent  9. Name Regis					05			Ap	·	
SPIEGEL & UTRERA, P.A. 1940 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145  Single accleration of requirement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. I am femiliar with, and accept the collegations of registered agent, or both, in the State of Florids. I am femiliar with, and accept the collegations of registered agent, or both, in the State of Florids. I am femiliar with, and accept the collegations of registered agent and sea / accitance.  SIGNATURE  FILE NOWILL FEE IS \$300.00  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the prior notice.  In accordance with s. 507, 193(2)(b), F.S., the corporation did not receive the filling accordance agent sequence agent	331	72 Country A		USI	<b>5</b> . Ca	ertificate of Status		Fee Required		
The Delta Name  STREET ADDRESS CITY-ST-2P TITLE  NAME STREET ADDRESS CITY-ST-2P TITLE	SPIEGEL & UTRERA, P.A.  1840 SW 22ND ST.  4TH FLOOR MIAMI, FL 33145  SIEGEL & UTRERA, P.A.  SIEGL & UTRERA, P.A.  SIEGEL & UTRERA, P.A.  SIEGEL & UTRERA, P.A.									
Comporation did not receive the prior notice.	the obligations of registered agent.  SIGNATURE  1 24 05									
TITLE MAME GAZZANEO, IVETTE GAZZANEO, IVETTE MAME GAZZANEO, IVETTE MIAMI, FL 33178  Delete MILINA, JULIETA I STREET ADDRESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP MIAMI, FL 33178  Delete MILINA, JULIETA I AGENTICA DORESS CITY-S1-ZIP  Delete MILINA MIAMI, FL 33178  AGENTICA DORESS CITY-S1-ZIP  MAGENTICA DORESS CITY-S1-ZIP  MAGENTICA DORESS CITY-S1-ZIP  MAGENTI										
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STREET ADDRESS CITY-SI-ZIP MIAMI, FL 33178 CITY-SI-ZIP MIAMI, FL 33178 CITY-SI-ZIP  MIAMI, FL 33178 CITY-SI-ZIP  MIAMI, FL 33178  CITY-SI-ZIP  CITY-			☐ Delete					Change	☐ Addition	
TITLE VS Addition  MAME LUNA, JULIETA I  4642 NW 97TH PL.  CITY-ST-2P  MIAMI, FL 33178  TITLE  MAME ANAME AN	STREET ADDRESS	4642 NW 97TH PL.		STREET ADDRESS		<u> 300</u> 0	46089	, 163,		
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NAME STREET ADDRESS CITY-ST-ZIP  TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  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 of the security that the information as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with all address, with all other like empowered.	NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS				☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP  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 full stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with all address, with all other like empowered.  SIGNATURE:  DRHC TCZZCIORO.  2005 1305 477 377	NAME Street address		☐ Delete	NAME STREET ADDRESS			Pers	M □ Change	☐ Addition	
SIGNATURE: 126/05 1305/477-8379	NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP				_ ,	-	
SIGNATURE	1/25/25 127 2379									
	SIGNAI	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER	<u> </u>	Sidon	Date	100	Daytime Phone #		