

1/2

**2008 FOR PROFIT CORPORATION
REINSTATEMENT**

FILED

08 DEC -1 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11022008 REIN-P CR2E098 (1/07)

4. FEI Number
20-0658683

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MARTINEZ, CARLOS O
7020 RUE GRANVILLE
MIAMI BCH, FL 33141

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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)

11/2/08
DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2009, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **MARTINEZ, CARLOS O**
STREET ADDRESS **2316 BAY DR #16**
CITY-ST-ZIP **MIAMI BCH, FL 33141**

TITLE **V** ☐ Delete
NAME **SILES, NORMA SUSANA**
STREET ADDRESS **2316 BAY DR #16**
CITY-ST-ZIP **MIAMI BCH, FL 33141**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **900138346289**
STREET ADDRESS **12/01/08--01071--010 **158.75**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

REINSTATEMENT

[Signature]

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

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

11/2/08
Date

Daytime Phone #

2/2

C. Martinez Structures Corporation
P.O. Box 13068
Miami, Florida 33101-9998

October 31, 2008

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: 2008 Profit Corporation Annual Report
Document Number: P04000012939
FEI Number: 20-0658683

Dear Division of Corporations,

Please be advised I did not receive the annual report notification pertaining to the above mentioned matter.

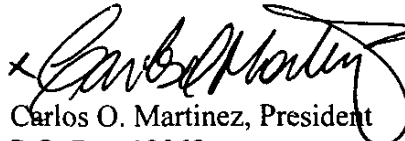
However I respectfully enclose USPS Money Order in the amount of \$158.75, one hundred fifty eight dollars and seventy five cents for the 2008 profit corporation annual report and certificate of status.

Please accept my sincere apologies for any inconvenience this may have caused you, as to our company has not been producing sufficient funds to cover for the expenses.

Thank you in advance for your prompt attention to this matter.

Should you have any additional questions please do not hesitate to contact me at the address listed above.

Very truly yours,


Carlos O. Martinez, President
P.O. Box 13068
Miami, Florida 33101-9998

Enclosures