

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
AND  
FILED

1082

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

06 SEP 13 PM 12:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P04000052698

1. Corporation Name

NEW MAG HORIZONS, INC.

2. Principal Office Address

755 NW 167 ST

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip Country

33055

3. Mailing Office Address

755 NW 167 ST

Suite, Apt. #, etc.

City & State

Miami, FL

Zip Country

33055

**REINSTATEMENT**

CR2E081 (12/05)

05-06 REC

4. Date Incorporated or Qualified  
To Do Business in Florida

3/26/04

5. FEI Number

20-0920749

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

PLASENCIA, HECTOR

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

755 NW 167 ST

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33055

800079940748  
09/19/06--01017--019 \*\*308.75

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

*Hector Plasencia*

REGISTERED AGENT MUST SIGN

Date 9/8/2006

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	PLASENCIA, HECTOR	3355 N.W. 106 ST	Miami, FL 33147
VP	PLASENCIA, JOSE M.	3355 N.W. 106 ST	Miami, FL 33147
D	SOSA, ANA V.	6765 N.W. 169 ST, Unit 4-C	Miami, FL 33015

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 contained in Chapter 119, 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:

*Hector Plasencia* HECTOR PLASENCIA

Date

9/8/2006

Daytime Phone #

2072

September 8, 2006

**New Mag Horizons, Inc.**  
**755 N.W 167 Street**  
**Miami, FL 33055**

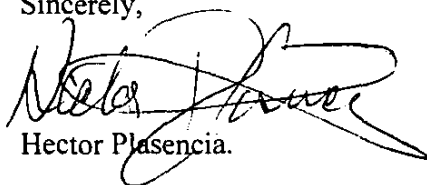
**To whom it may concern:**

Name of company: **New Mag Horizons, Inc.**  
Dock Number: **P04000052698**

Please find enclosed a check for three hundred dollars (\$308.75 for *CUS* annual reports. We ask with this letter that the penalty fees be waved, due to the fact that we did not receive notification by mail for 2005 nor 2006.

Thanking you in advance.

Sincerely,

  
Hector Plasencia.