


2006 FOR PROFIT CORPORATION REINSTATEMENT

1 of 2

DOCUMENT # P04000123415		
1. Entity Name PRISCILLA'S DANCE ACADEMY CORP.		

Principal Place of Business 4501 PALM AVE. AVE. SUITE 205 HIALEAH, FL 33012	Mailing Address 4501 PALM AVE. AVE. SUITE 205 HIALEAH, FL 33012
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

FILED
06 FEB 17 PM 3:57
SECRET
TALLAHASSEE, FLORIDA



4. FEI Number 20-1622981	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CARRERA, PRISCILLA 2530 SW 16TH TERR. MIAMI, FL 33145
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARRERA, PRISCILLA 2530 S.W. 16TH TERR. MIAMI, FL 33145 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARRERA, XIOMARA 2530 S.W. 16TH TERR. MIAMI, FL 33145 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400067011514 03/03/06--01022--001 ***308.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Priscilla Carrera DIRECTOR Date: 2/14/06 Daytime Phone #: 3058285111

2082

Priscilla's Dance Academy Corp.
4501 Palm Avenue, Suite 205
Hialeah, FL 33012
(305) 828-5111

February 9, 2006

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

Ref: Document #P04000123415
FEI #20-1622981

To whom it may concern:

Enclosed please find my 2006 For Profit Corporation Reinstatement form.
Please accept my reinstatement since I never received the original
renewal form for 2005.

If you have any questions, please feel free to call me at (305) 828-5111.
Thank you in advance for your assistance in this matter.

Respectfully,



Priscilla Carrera
2530 S.W. 16 Terrace
Miami, FL 33145

Enclosure

[Faint, illegible text at the bottom of the page, likely a carbon copy or bleed-through from the reverse side.]