

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000057660

**FILED**  
**Nov 08, 2011**  
**Secretary of State**

**Entity Name:** BROADCASTING MEDIA PARTNERSHIP INC.

**Current Principal Place of Business:**

1154 ARBOR HILL CR  
MINNEOLA, FL 34715

**New Principal Place of Business:**

5996 BENT PINE DRIVE  
3303  
ORLANDO, FL 32822

**Current Mailing Address:**

1154 ARBOR HILL CR  
MINNEOLA, FL 34715

**New Mailing Address:**

5996 BENT PINE DRIVE  
3303  
ORLANDO, FL 32822

**FEI Number:** 27-3067900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUIZ-BALSA, MARIO  
5025 SOUTH ORANGE AVE  
101  
ORLANDO, FL 32809 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:** MIGUEL MUNOZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MUNOZ, MIGUEL A  
**Address:** 5996 BENT PINE DRIVE, APT 3303  
**City-St-Zip:** ORLANDO, FL 32822

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** MIGUEL MUNOZ

P

11/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date