

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherin Hazris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAY -2 PM 3:29

DOCUMENT # **P93000076557**

1. Corporation Name

Ispe Jewelry Manufacturing Corp
12818 S.W. 8 street
Miami, FL 33184

2. Principal Office Address

12818 SW 8 street

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33184

Country

3. Mailing Office Address

12818 SW 8 street

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33184

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/1/83

5. FEI Number

65-0451826

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

REINSTATEMENT 00-07

7. Name and Address of Current Registered Agent

Name

J. Michael Barreneche

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

1785 NW 79 Avenue

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33126

000004303070-9
-05/23/01--01090-017
******900.00 ****900.00**

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

Mr. Barreneche

Date **4-27-01**

REGISTERED AGENT MUST SIGN

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 |
|--------|--------------------------------------|---|--------------------|
| PSD | Isidoro Pelea Jr. | 2401 SW 138 Avenue | Miami, FL 33175 |
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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 under section 119.07(3)(i), 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:

Isidoro Pelea Jr.

Isidoro Pelea Jr.

4-27-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/00)