

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Kathleen Harris
Secretary of State
DIVISION OF CORPORATIONS

PS-193

FILED

00 OCT 30 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000077031

1. Corporation Name

CURRENT EVENTS, INC.

Principal Place of Business

Mailing Address

~~0245 SW 157TH ST~~ **7241 SW 168th St.**
~~SUITE 209~~ **Suite A**
MIAMI FL 33157
US

~~0245 SW 157TH ST~~ **7241 SW 168th St.**
~~SUITE 209~~ **Suite A**
MIAMI FL 33157
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

7241 SW 168th St.

7241 SW 168th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite A

Suite A

City & State

City & State

Miami, FL

Miami, FL

Zip

Country

Zip

Country

33157

USA

33157

USA

4. Date Incorporated or Qualified To Do Business in Florida

11/08/1993

5. FEI Number

65-0452768

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PSTD	BENSON, CHERYL J	0245 SW 157TH ST SUITE 209 7241 SW 168th St, Suite A	MIAMI FL 33157

9000003469509--9

-11/20/00--01011--016

******150.00 ****150.00**

SP

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RAFFERTY, WILLIAM L JR
1101 BRICKELL AVE
SUITE 1400
MIAMI FL 33131

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Date

REGISTERED AGENT MUST SIGN

11. 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: Cheryl J. Benson 10-25-00 305-251-0852
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/00)

Current **E**vents
Corporate Event Management

48242

7241 S.W. 168th St., Suite A
Miami, Florida 33157
Phone: 305-251-0852 • Fax: 305-251-0835

October 26, 2000

Department of State
Annual Reports Filings
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Department of State:

We have received the attached Application for Reinstatement for Current Events, Inc., but had filled out and mailed the original Annual Report Form along with our check #2525 for \$150.00, on March 22, 2000. I have attached a copy of the original check for your review. I have called my bank officer and the original check has not cleared as of today. Please consider allowing us to replace the original check with a new check #2628 for \$150.00 as attached without the penalty for late filing. We would greatly appreciate your consideration in this matter. Thank you in advance for your assistance.

Sincerely,

Cheryl J. Benson

Cheryl J. Benson
President

Note: We have moved our offices to: Current Events, Inc., 7241 S.W. 168th St., Suite A, Miami, FL 33157.