PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
03 MAY -5 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

900018007059
05/05/03--01057--001 **1265.00

DOCUMENT # P93000078969

1. Corporation Name MORE ADVERTISING AGENCY, INC

2. Principal Office Address		**3.** Mailing Office Address	
2090 NW 79 AVE		2090 NW 79 AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: MIAMI, FLORIDA		City & State: MIAMI, FLORIDA	
Zip: 33122	Country: USA	Zip: 33122	Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/15/1993

5. FEI Number: 650458109 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ SEE Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: ANTONIO MORENO

Street Address (P.O. Box Number is Not Acceptable): 13330 SW 5 ST

900018007059
05/05/03--01057--002 **8.75

Suite, Apt. #, Etc.:

City: MIAMI | State: FL | Zip Code: 33184

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 _____ Date 4/30/2003

REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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
SECRETARY	ANTONIO MORENO	13330 SW 5 ST	MIAMI,FL 33122
V. PRESIDENT	JULIA MORENO	13330 SW 5 ST	MIAMI,FL 33122
PRESIDENT	MARK MORENO	348 PAYNE DR	MIAMI SPRINGS,FL 33166

10. I certify that I am an officer or director of 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: _____ ANTONIO MORENO 4/30/2003 305-592-4836

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

gr s/1

more advertising agency

APRIL 30, 2003

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
409 EAST GAINES ST
TALLAHASSEE, FL 32399

TO WHOM IT MAY CONCERN:

WE ARE SENDING OUR 1996, 1997, 1998, 1999, 2000, 2001, 2002 & 2003, UNIFORM BUSINESS REPORT LATE, BECAUSE WE MOVED FROM OUR PREVIOUS ADDRESS AND WE NEVER RECEIVED YOUR NOTIFICATION TO BE ABLE TO FILE IT ON TIME.

PLEASE WAVE YOUR LATE PAYMENT PENALTY FEE THIS TIME, SINCE OUR PAYMENT HAS BEEN UNINTENTIONALLY LATE.

PLEASE SEND US CERTIFICATE OF STATUS FOR THE YAR 2003. ENCLOSED CK.

THANK YOU FOR YOUR COOPERATION IN THIS MATTER.

BEST REGARDS,

ANTONIO MORENO
SECRETARY

2090 NW 79TH AVE. MIAMI FL 33122