

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000033091

1. Corporation Name

LA PLAYA PROMOTIONS, INC.

Principal Place of Business
**420 LINCOLN ROAD STE. 206
MIAMI BEACH FL 33139**

Mailing Address
**P.O. BOX 52-4183
MIAMI FL 33152-4183**

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/02/1994

5. FEI Number

65-0486363

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	RIVERO, JORGE H SR	2555 COLLINS AVE STE 2406	MIAMI BEACH FL
VD	RIVERO, JORGE JR.	2555 COLLINS AVE STE 2206	MIAMI BEACH FL
VD	RIVERO, JORGE JR	2555 COLLINS AVE STE 2206	MIAMI BEACH FL
TD	RIVERO, JORGE H SR	2555 COLLINS AVE STE 2406	MIAMI BEACH FL
SD	RIVERO, JUAN C SR	433 W 45TH PLACE	HIALEAH FL
REINSTATEMENT			

8. Name and Address of Current Registered Agent

**CARNESOLTAS, ANA-MARIA PA
3971 SW 8TH STREET
STE. 308
MIAMI FL 33134**

9. Name and Address of New Registered Agent

Name **RIVERO JORGE H**
Street Address (P.O. Box Number Is Not Acceptable)
2555 COLLINS AVE
Suite, Apt. #, Etc.
SUITE 2406
City **MIAMI BEACH** State **FL** Zip Code **FL**

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

Rivero

REGISTERED AGENT MUST SIGN

Date **11-21-97**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on Intangible tax.)

12. 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:

Rivero **JORGE H. RIVERO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-31-97 305-477-0577

012E040 (8/97)