

FROM: OSCAR<LOPEZDKPDTDA

PHONE NO. : 3055573832

May 11 2000 09:15AM P2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
RENEWALFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

00 JUL 12 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000052613 YEAR 2000

1. Corporation Name

C J EDITORIAL SERVICES CORPORATION

Principal Place of Business

Mailing Address

9361 SW 118 PL

SAME

MIAMI FL 33186

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

2. New Principal Office Address, If Applicable

SAME

3. New Mailing Office Address, If Applicable

SAME

4. Date Incorporated or Qualified
To Do Business in Florida

07/15/1994

5. FEI Number

65-0511083

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
PTD	RODAS, CELESTE A	9361 SW 118 PL	MIAMI FL 33186
			600003342766-1
			08/01/00-01034-009
			****150.00 ****150.00

8. Name and Address of Current Registered Agent

SAME

CELESTE RODAS
9361 SW 118 PL
Miami, FL 33186

9. Name and Address of New Registered Agent

Name
SAME

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

PRESIDENT

REGISTERED AGENT MUST SIGN

Date MAY 11/2000

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: X

PRESIDENT

MAY 11/2000

(305) 275-2020