PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

P94000054790

FILED
99 NOV -4 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000054790

1 Corporation Name

ART WAVES, INC.

Principal Place of Business / Mailing Address

7100 W. COMERCIAL BLVD. # 106.
FT. LAUDERDALE, FL. 33319 US.

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

2. New Principal Office Address, If Applicable
1427 BANYAN WAY
Suite, Apt. #, etc.
City & State: WESTON, FLORIDA.
Zip: 33327. Country: U.S.

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 07-22-1994.

5. FEI Number: 65-0525426 — X 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PRESS.	RICARDO FLOREZ.	1427 BANYAN WAY.	WESTON, FL. 33327.
V. PRESS.	ESPERANZA URICOECHEA	1427 BANYAN WAY	WESTON, FL. 33327
SEC.	RICARDO FLOREZ.	1427 BANYAN WAY	WESTON, FL. 33327
TREA.	ESPERANZA URICOECHEA.	1427 BANYAN WAY	WESTON, FL. 33327
DIR.	RICARDO FLOREZ.	1427 BANYAN WAY	WESTON, FL. 33327
DIR.	ESPERANZA URICOECHEA.	1427 BANYAN WAY	WESTON, FL. 33327.

8. Name and Address of Current Registered Agent

TERREMARK CORPORATE AGENTS INC.
2601 S. BAYSHORE DR. 19th FLOOR
MIAMI, FL. 33133. U.S.

9. Name and Address of New Registered Agent

Name: CARLOS A. MALDONADO.
Street Address (P.O. Box Number is Not Acceptable): 11038 BAYBREEZE WAY
Suite, Apt. #, Etc.
City: BOCA RATON. State: FL Zip: 33428-1250

000003012440--8
-10/12/99--01031--006
***1093. $150.00

CR2E040 (1-98)

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

Signature of Registered Agent: REINSTATEMENT 92-99 Date: OCT.-04-1999.
REGISTERED AGENT MUST SIGN

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: [signature] 10-04-99.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #