

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 MAR 24 AM 11:27

SECRETARY OF STATE
TALLahassee, FLORIDA

DOCUMENT # P94000072373

1. Corporation Name

CAD STUDIO ARCHITECTURE, INC.

2. Principal Office Address

4808 SW 72ND AVENUE

Suite, Apt. #, etc.

N/A

City & State

MIAMI, FL.

Zip

33155

Country

U.S.A.

3. Mailing Office Address

4808 SW 72ND AVENUE

Suite, Apt. #, etc.

N/A

City & State

MIAMI, FL

Zip

33155

Country

U.S.A.

CR2E081 (12/05)

**4. Date Incorporated or Qualified
To Do Business in Florida**

OCTOBER 3, 1994

5. FEI Number

65-0527914

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RODRIGUEZ, ANTONIO E.

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

4808 SW 72 AVENUE

Suite, Apt. #, Etc.

N/A

City

MIAMI

State
FL

Zip Code

33155

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

Antonio Rodriguez
REGISTERED AGENT MUST SIGN

Date 3/20/06

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
PD	RODRIGUEZ, ANTONIO E.	4808 SW 72 AVENUE	MIAMI, FL. 33155
VD	IGLESIAS, THOMAS	4808 SW 72 AVENUE	MIAMI, FL. 33155
STD	ACOSTA, JULIO E.	4808 SW 72 AVENUE	MIAMI, FL. 33155
			500070442615 04/14/06--01023--019 **1058.75

10. 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 contained in Chapter 119, 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 Rodriguez (ANTONIO RODRIGUEZ) 3/20/06 (305) 602-1008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #