

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED 96 NOV 22 AM 8:41 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
DOCUMENT # P950000 97201 1. Corporation Name M. G. A. IMPORT & EXPORT INC.		800002015308--8 -11/26/96--01167--018 *****383.75 *****383.75					
Principal Place of Business 941 N.E. 170 ST # 202 NORTH MIAMI BEACH, FL. 33162						Mailing Address 941 N.E. 170 ST # 202 NORTH MIAMI BEACH, FL. 33162	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.						DO NOT WRITE IN THIS SPACE	
2. New Principal Office Address, If Applicable 941 N.E. 170 ST # 202 Suite, Apt. #, etc. # 202 City & State No. Miami Beach, FL. Zip 33162 Country USA		3. New Mailing Address, If Applicable SAME Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida Dec 27, 1995 5. FEI Number Applied For ☒ Applied For ☐ Not Applicable 6. CERTIFICATE OF STATUS DESIRED ☒			
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip				
PRE	URIE MOREIRA	Sao Paulo BRAZIL	Sao Paulo, BRAZIL				
Sec	FRANCIS WAGNER	941 N.E. 170 ST #202	No. Mia Beach, FL.				
125	SILVIO DE ASSIS						
8. Name and Address of Current Registered Agent ANNA MARIA VISSHER 4995 N.W. 79 AVE ste 118 MIAMI, FL. 33166			9. Name and Address of New Registered Agent FRANCIS WAGNER SILVIO DE ASSIS Street Address (P.O. Box Number is Not Acceptable) 941 N.E. 170 ST # 202 Suite, Apt. #, Etc. # 202 City No. Mia Beach State FL Zip Code 33162				
10. 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 Francis Wagner Date 11/19/96 REGISTERED AGENT MUST SIGN							
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)							
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Francis Wagner Date 11/19/96 Daytime Phone # 652-2370 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							

REINSTATEMENT 1996

11-20-96