

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAY -3 PM 6:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000022605

1. Corporation Name

ROJAS-PEREZ SPORTS MARKETING CORPORATION

2. Principal Office Address

19195 MYSTIC DRIVE BLDG 100

Suite, Apt. #, etc.

LP2

City & State

AVENTURA, FL

Zip

33180

Country

U.S.A.

3. Mailing Office Address

1390 SOUTH DIXIE HWY

Suite, Apt. #, etc.

1108

City & State

CORAL GABLES, FL

Zip

33146

Country

U.S.A.

**4. Date Incorporated or Qualified
To Do Business in Florida 3/13/1996**

5. FEI Number
65-0690585

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

ATANACIO PEREZ

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

1717 N. BAYSHORE DR.

Suite, Apt. #, Etc.

2735

City

MIAMI

State

FL

Zip Code

33132

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

Atanacio Perez
REGISTERED AGENT MUST SIGN

Date

4/26/04

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	OCTAVIO V ROJAS	19195 MYSTIC DRIVE BLDG100 LP2	AVENTURA, FL 33180
VPD	ATANACIO PEREZ	1717 N. BAYSHORE DR #2735	MIAMI, FL 33132

REINSTATEMENT

03-04

4/26/04

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 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:

Atanacio Perez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/26/04

Daytime Phone #