

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR 1998-1999 AR.  FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 99 JUN 28 11:10:39
 TALLAHASSEE FLORIDA

700002939167--2
 -07/22/99--01093--007
 ****300.00 ****300.00

DOCUMENT # P07000047014
 1. Corporation Name
COSTPRESS PRINTING, INC.

Principal Place of Business Mailing Address
 If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 1750 W. 39 PLACE Suite, Apt. #, etc. SUITE 1004 City & State MIAMI, FL Zip 33012 Country DADE	3. New Mailing Office Address, If Applicable 1750 W. 39 PLACE Suite, Apt. #, etc. SUITE 1004 City & State MIAMI, FL Zip 33012 Country DADE
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4. Date To Do Business Qualified 5/28/97	5. FEI Number 65-0756232	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
RD	RICARDO CARMENATE	1750 W. 39 PL, # 1004	MIAMI, FL 33012

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent
 Name **RICARDO CARMENATE**
 Street Address (P.O. Box Number is Not Acceptable)
1750 W. 39 PLACE
 Suite, Apt. #, Etc.
SUITE 1004
 City **MIAMI** State **FL** Zip Code **33012**

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 **+ Ricardo Carmenate** Date **5/5/99**
 REGISTERED AGENT MUST SIGN

11. This corporation owes 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: **+ Ricardo Carmenate**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ricardo Carmenate
 Date **5/5/99 (205)** Daytime Phone # **821-2812**

CR2001 (12-99)

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June 18, 1999

Costpress Printing Inc.
1750 W 39 Pl. #1004
Hialeah, FL 33012

To Whom It May Concern:

On June 1, 1999, I send a check for \$300.00 and a application for reinstatement it was sent back to me and I called 1(850) 487-6059 and they told me to write this letter and explain that I never received the 1998 form because as you could see you have the wrong address in the computer.

I'm sending a check for 1998 and 1999, \$150.00 for each year and if you could please waive the rest of the fees and please correct the address.

Thank you,



Ricardo Carmenate
President