

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000008161

1. Corporation Name

PHOTOTRADER, INC.

Principal Place of Business

4505 NW 72 AVE
MIAMI FL 33166

Mailing Address

4505 NW 72 AVE
MIAMI FL 33166

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/26/1998

5. FEI Number

65-0808755

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 3	City / State / Zip 4
DP	MASTRODICASA, NANDO	4505 NW 72 AVE	MIAMI FL 33166
DV	MASTRODICASA, DONNA	4505 NW 72 AVE	MIAMI FL 33166

800024252318
10/29/03--01047--014 **175.00

8. Name and Address of Current Registered Agent

SAENZ, RAUL M
8180 N.W. 36 ST., #100
MIAMI FL 33166

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

Nando Mastrodicasa
REGISTERED AGENT MUST SIGN

Date OCTOBER 25, 03

11. 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:

Nando Mastrodicasa
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCTOBER 25, 03
Date

305-994-7772
Daytime Phone #

CR2E040 (7/03)



Monday, October 27, 2003

Department of State
Division of Corporations
409 East Gaines ST.
Tallahassee, FL 32399

REF: Phototrader Inc FEI# 65-0808755

To Whom It May Concern:

Attached we are sending a check for the reinstatement of the company. We have moved and we just received your notice.

Our new address is:

7205 NW 44ST.
Miami FL 33166

Also, we no longer have Saenz, Raul M. as our Registered Agent. Please remove them from your records. All correspondence has to be sent to our address noted above.

If you require any further information, please do not hesitate to contact me.

Cordially,

A handwritten signature in cursive script that reads 'Nando Mastrodicasa'.

Nando Mastrodicasa
President

7205 N.W. 44th ST. , MIAMI, FLORIDA, 33166
PHONE: 305-994-7772 FAX: 305-994-7886
Email: miami@phototrader.com