

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR 16 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

DOCUMENT # P98000035683

1. Corporation Name

Innovations 3,000 INC.

2. Principal Office Address

5453 NW 109 Ct

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33178

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

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

5. FEI Number

65-0862088

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

Jose Mejia

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

5453 NW 109 Ct

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33178

400030505454

03/16/04-01026-009 **301.00

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

Jose Mejia

REGISTERED AGENT MUST SIGN

Date 3/09/04

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
	President, Jose Mejia	5453 NW 109 Ct	Miami, Florida 33178

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

Jose Mejia Jose Mejia

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/09/04

Date

786-326-7085

Daytime Phone #

CR2E081 (01/04)

INNOVATIONS 3,000 INC.

5453 NW 109 Ct, Miami FL 33178

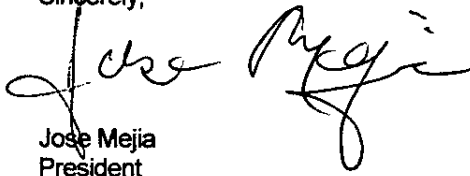
March 9, 2004

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

This letter is to inform you that I never received the forms to renew my corporation for the year 2003. I never receive them because I change my address. Here I am sending a check in the amount of \$300.00 (three hundred) dollars for 2003 and 2004 Annual Report Fee and Corporate Supplemental fee.

Sincerely,

A handwritten signature in black ink, appearing to read "Jose Mejia", written in a cursive style.

Jose Mejia
President