

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL -3 PM 1:20

DOCUMENT # P98000100580

1. Corporation Name

Editorial Place Corp.

200021306052
07/03/03--01088--004 **300.00

2. Principal Office Address

808 Brickell Key Dr.

Suite, Apt. #, etc.

#3704

City & State

Miami, FL

Zip

33131

Country

USA

3. Mailing Office Address

9190 Sunset Drive

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33173

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/03/1998

5. FEI Number

650985895

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

Jack Weitzman

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

9190 Sunset Drive

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33173

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

Jack Weitzman

REGISTERED AGENT MUST SIGN

Date JULY 1, 2003

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
D/P/S	Pellerano, Eduardo	808 Brickell Key Dr., #3704	Miami, FL 33131

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:

E. Pellerano

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/30/03 (305) 571-3310

Daytime Phone #

CR2081 (10/02)

EDITORIAL PLACE CORP.
808 Brickell Key Drive, #3704
Miami, FL 33131

June 30, 2003

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

RE: Editorial Place Corp./Reinstatement

To Whom It May Concern:

Enclosed please find an application for reinstatement of Editorial Place Corp. and a check for \$300.00. We did not receive the annual report forms for 2001 or 2002. Apparently, you had an incorrect mailing address for us. I understand, according to a telephone conversation with your office, that we only need to pay \$300.00 due to our nonreceipt of the annual report forms in the mail.

Please be so kind as to reinstate the corporation and to send an acknowledgement thereof.

Very truly yours,



Enclosures