

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # P99000017034

03 JAN - 2 AM 8:44

1. Corporation Name

ATENTO USA, INC.

REINSTATEMENT 02-03

Principal Place of Business

1221 BRICKELL AVENUE  
SUITE 2000  
MIAMI FL 33131

Mailing Address

C/O PATRICIA MENENDEZ  
1221 BRICKELL AVENUE, SUITE 2000  
MIAMI FL 33131



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

12/19/02 01066 004 \$750.00

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

SUITE 600

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

C/O Patricia Hernandez  
1221 Brickell Suite 2100

City & State

MIAMI, FL

Zip

33131

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

02/19/1999

5. FEI Number

65-0938989

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

01/15/03--01074--006 \*\*150.00

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)

Name of Officers  
and/or Directors

Street Address of Each  
Officer and/or Director

City / State / Zip

DP HERNANDEZ, RAFAEL

1221 BRICKELL AVE

MIAMI FL 33131

DCEO SANCHEZ, FEDERICO

1221 BRICKELL AVE

MIAMI FL 33131

CEOT GOMEZ, ALBERTO

1221 BRICKELL AVE

MIAMI FL 33131

S CAMBO, PATRICIA M

1221 BRICKELL AVE

MIAMI FL 33

DP HORCASO, ALBERTO

C/O GREENBERG TRAVEL  
1221 BRICKELL AVE. 21ST Floor

MIAMI FL

D.S. CEREZO, REYES

C/O GREENBERG TRAVEL  
1221 BRICKELL AVE. 21ST Floor

MIAMI FL

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

12/19/02--01066--004 \*\*750.00

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

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Jeanine Reynolds  
as its agent

Date

12-31-02

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/14/02

CR2E040 (8/02)