

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JAN 14 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000025091

1. Corporation Name

DIVA DIGITAL PICTURES INC.

Principal Place of Business

3020 SW 28 STREET
COCONUT GROVE FL 33133

Mailing Address

3020 SW 28 STREET
COCONUT GROVE FL 33133



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

03/18/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

5. FEI Number

65-0908494

Applied For

Not Applicable

Zip

Country

Zip

Country

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)

Name of Officers
and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

PD

PRIDA, MAYTE

3020 SW 28 STREET

COCONUT GROVE FL 33133

~~SE - LUCAS, RICARDO~~

~~6000 SW 28 STREET~~

~~COCONUT GROVE FL 33133~~

600010077436
01/14/03--01056--008 **150.00

600010077436
01/14/03--01056--009 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MOYTE, PRIDA

1111 BRICKELL BOY DR. 1802

MIAMI FL 33131

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

CRE040 (8/02)

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

Date 1/9/03

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/03 35.445.1278

DIGITAL **DIVA** PICTURES
PRODUCTION HOUSE

January 9, 2003

To Whom It May Concern:

My name is Mayte Prida and I am the president of Diva Digital Pictures, Inc. The purpose of this letter is to ask you for the reinstatement which was established on March 18, 1999, with Federal ID # 650-908-494.

I am asking you to waive the late fee due to the fact that I did not received any letters from the Division of Corporations last year.

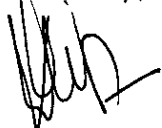
I was diagnosed with cancer about 14 months ago, and since then I have been practically unable to come to the office due to the fact that I had to undergo five surgeries, six months of chemotherapy, and radiation. During that period of time my former partner left the company, and my neighbors were kind enough to keep an eye on the property, and take care of the mail.

I am enclosing a check for \$150.00 for the year 2000 and a check for \$150.00 for the year 2003.

I apologize about the mistake but I hope you can understand that I have been through a very difficult time.

If you have any questions, please do not hesitate to call me.

Sincerely,



Mayte Prida
President