

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 FEB 12 PM 12:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000083979**

1. Corporation Name

Deco Models Club, Incorporation

P99000083979

2. Principal Office Address

233 First Street

Suite, Apt. #, etc.

1

City & State

Miami Beach FL

Zip

33139

Country

U.S.A.

3. Mailing Office Address

233 First Street

Suite, Apt. #, etc.

1

City & State

Miami Beach

Zip

FL

Country

33139

2000-2001 UBR

4. Date Incorporated or Qualified
To Do Business in Florida

9/22/99

5. FEI Number

95-3344791

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

Noemi Rojas

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

233 First St.

Suite, Apt. #, Etc.

#1

City

Miami Beach

State
FL

Zip Code

33139

400003743334-5

02/20/01-01067-020

******300.00 ****300.00**

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

[Signature]

REGISTERED AGENT MUST SIGN

Date **1/8/2001**

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 Ms.	Noemi Rojas	20 Island Ave, #1102	Miami Beach, FL 33139

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:

[Signature] **Noemi Rojas**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/8/00

Date

305/673-1900

Daytime Phone #

CR2E081 (9/99)

Deco

Models Club, Inc.

A Model & Talent Agency

233 1st Street, Suite #1 • Miami Bch, FL 33139

November 8, 2000

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find my corporation reinstatement form. After speaking with one of your representatives and inquiring why I did not receive any notices we realized that my suite number of my address was not on record. Therefore, this may be the reason why I never received a notice. I am asking that you waive any penalties for the reason mentioned above.

Per your instructions, I am enclosing a check for \$150.00 along with the reinstatement form. Should you have any questions, please feel free contact me at (305) 401-9788 or (305) 673-1900.

Sincerely,



Noemi Rojas
President