PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 DEC -3 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 97

DOCUMENT # S58684

1. Corporation Name
PAULY U.S.A. CORP.

Principal Place of Business
7420 S.W. 42ND STREET
MIAMI FL 33155

Mailing Address
C/O JULIAN HERNANDEZ
1150 NW 72ND AVE., SUITE 307
MIAMI FL 33126

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

2. New Principal Office Address, If Applicable
1459 S. Combee Rd.
Suite, Apt. #, etc.
City & State
Lakeland, Fl.
Zip 33801 Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

4. Date Incorporated or Qualified To Do Business In Florida 06/11/1991

5. FEI Number 65-0247462 Applied For / Not Applicable

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	DE PENA, MANUEL	~~3311 S.W. 115TH COURT~~ 1904 Inverness Dr.	~~MIAMI FL~~ Lakeland, Fl. 33813
STD	ESTRELLA, PAULA	~~3311 S.W. 115TH COURT~~ 1904 Inverness Dr.	~~MIAMI FL~~ Lakeland, Fl. 33813
			800002366208--5 -12/08/97--01141--005 ******8.75 ******8.75
			800002366208--5 -12/08/97--01141--006 ****750.00 ****750.00

8. Name and Address of Current Registered Agent
DE PEÑA, MANUEL
3311 S.W. 115TH COURT
MIAMI FL 33165

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
1904 Inverness Dr.
Suite, Apt. #, Etc.
City Lakeland, State FL Zip Code 33813

CR2E040 (8/97)

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.

Signature of Registered Agent X Manuel De Peña Date 11-23-97
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on Intangible tax.)

12. 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: Manuel De Peña — Manuel de Peña — 10/11/97 — 941-669-0614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #