

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

00 FEB 14 PM 3:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 578448

1. Corporation Name

INTERNATIONAL BRAZILIAN ADVERTISING  
CORPORATION

Principal Place of Business

Mailing Address

501 Brickell Key Drive  
Suite 400  
Miami, Florida 33131

SAME

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

2. New Principal Office Address, If Applicable  
801 Brickell Bay Drive

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Box 19

SAME

City & State

City & State

Miami, Florida

Zip

Country

Zip

Country

33131

Miami-Dade

REINSTATEMENT

00

4. Date Incorporated or Qualified  
To Do Business in Florida

9/9/91

5. FEI Number

65-028886

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)<br>1 | Name of Officers<br>and/or Directors<br>2 | Street Address of Each<br>Officer and/or Director<br>(Do NOT Use Post Office Box Numbers)<br>3 | City / State / Zip<br>4   |
|---------------|---|--|---|
| D/P           | Rodrigo Soares                            | 801 Brickell Bay Drive<br>Box 19, Miami, FL 33131  | Miami, FL 33131   |
| D/VP/IT       | MIRTHA ARRIARAN                           | SAME   | SAME  |
|               |   |  | 200003144332--3<br>-02/23/00--01083--001<br>****758.75 ****758.75 |
|               |   |  |   |
|               |   |  |   |
|               |   |  |   |
|               |   |  |   |

8. Name and Address of Current Registered Agent

N/A

9. Name and Address of New Registered Agent

Name

Mirtha Arriaran

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

905 Brickell Bay Drive

Suite, Apt. #, Etc.

Lobby

City

Miami

State

FL

Zip Code

33131

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

*Mirtha Arriaran*  
REGISTERED AGENT MUST SIGN

Date

2/11/2000

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. 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.

KE

SIGNATURE:

*Mirtha Arriaran*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/2000

Date

305-444-4949

Daytime Phone #

CR2EQ40 (12/96)