

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

REINSTATEMENT

1992
1996

DOCUMENT #

V00284

1. Corporation Name

Radio y Musica, Inc.
(formerly, Alonso Communication, Inc.)

Principal Place of Business

Mailing Address

4809 N. Armenia Ave
Suite 230
Tampa, FL 33603

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

2. New Principal Office Address, If Applicable

333 Sylvan Avenue

3. New Mailing Address, If Applicable

333 Sylvan Avenue

Suite, Apt. #, etc.

Suite 304

Suite, Apt. #, etc.

Suite 304

City & State

Englewood Cliffs, NJ

City & State

Englewood Cliffs, NJ

Zip

07632

Country

U.S.A.

Zip

07632

Country

U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida

12-13-91

5. FEI Number

59-3101950

Applied For

Not Applicable

CERTIFICATE OF STATUS DESIRED

20

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 (Do NOT Use Post Office Box Numbers)	City / State / Zip
P/T/D	Alfredo Alonso	333 Sylvan Ave. -- Suite 304	Englewood Cliffs, NJ 07632
V/S/D	Eugenia Alonso	333 Sylvan Ave. -- Suite 304	Englewood Cliffs, NJ 07632

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-11/06/96--01031--010
***1183.75 ***1183.75

8. Name and Address of Current Registered Agent

Alfredo Alonso
10708 Tabor Drive
Tampa, FL 33624

9. Name and Address of New Registered Agent

Name
Alfredo Alonso

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

3901 Willow Tree Place

Suite, Apt. #, Etc.

City Tampa

State FL

Zip Code 33624

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

[Signature]
REGISTERED AGENT MUST SIGN

Date 9-17-96

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Eugenia Alonso
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(201) 541-9555

Date

Daytime Phone #

Eugenia Alonso

CR2000 (12/96)