F24000003696

(Requestor's Name)

(Address)

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2024 JUL -9 AM 10:13

T. LEMIEUX
JUL 13 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEGAMEDIOS, S.R.L
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CLARISA MELENDEZ TEJADA
Name of Person

J & C PROPERTY MANAGEMENT, INC
Firm/Company

8300 WEST FLAGLERT STREET, SUITE 115
Address

MIAMI, FLORIDA 33144
City/State and Zip code

CLARY108@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CLARISA MELENDEZ TEJADA at (305) 7710-7703
Name of Person — Area Code — Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ $70.00 Filing Fee
☐ $78.75 Filing Fee & Certificate of Status
☐ $78.75 Filing Fee & Certified Copy
■ $87.50 Filing Fee, Certificate of Status & Certified Copy

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2024

CLARISA MELENDEZ TEJADA
8300 W FLAGLERT ST STE 115
MIAMI, FL 33144

SUBJECT: MEGAMEDIOS, S.R.L.
Ref. Number: W24000093317

We have received your document for MEGAMEDIOS, S.R.L. and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

RECEIVED
JUL 11 2024

Letter Number: 524A00013423

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. MEGAMEDIOS , S.R.L
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

MEGAMEDIOS, S.R.L. CORP.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. SANTO DOMINGO, DOMENICAN REPUBLIC
(State or country under the law of which it is incorporated)

3. NA
(FEI number, if applicable)

4. February 5, 2003
(Date of incorporation)

5. February 5, 2025
(Date of duration, if other than perpetual)

6. May 1, 2024
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8300 WEST FLAGLER STREET, MIAMI, FL 33144
(Principal office **street** address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CLARISA MELENDEZ TEJADA

Office Address: 10235 SW 66TH STREET

MIAMI (City), Florida 33173 (Zip code)

FILED
2025 JUN -9 AM 10:

9. **Registered agent's acceptance:**
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: ______
☐ Vice Chairman Address: ______
☐ Director ______
■ President CLARISA MELENDEZ TEJADA
☐ Vice President JAVIER A GONZALEZ
☐ Secretary ☒ Treasurer
☐ Other ______ ☐ Other ______

☐ Chairman Name: ______
☐ Vice Chairman Address: ______
☐ Director ______
☐ President ______
☐ Vice President CLARIBEL CONTRERAS
■ Secretary ☐ Treasurer
☐ Other ______ ☐ Other ______

☐ Chairman Name: ______
☐ Vice Chairman Address: ______
☐ Director ______
☐ President ______
☐ Vice President ______
☐ Secretary ☐ Treasurer
☐ Other ______ ☐ Other ______

☐ Chairman Name: ______
☐ Vice Chairman Address: ______
☐ Director ______
☐ President ______
☐ Vice President ______
☐ Secretary ☐ Treasurer
☐ Other ______ ☐ Other ______

☐ Chairman Name: ______
☐ Vice Chairman Address: ______
☐ Director ______
☐ President ______
☐ Vice President ______
☐ Secretary ☐ Treasurer
☐ Other ______ ☐ Other ______

☐ Chairman Name: ______
☐ Vice Chairman Address: ______
☐ Director ______
☐ President ______
☐ Vice President ______
☐ Secretary ☐ Treasurer
☐ Other ______ ☐ Other ______

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. ______________________________
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. CLARISA MELENDEZ TEJADA, PRESIDENT
(Typed or printed name and capacity of person signing application)

Impuestos Internos

República Dominicana
Ministerio de Hacienda

CERTIFICACIÓN DE REGISTRO

Núm.: C0424007392271

La Dirección General de Impuestos Internos **CERTIFICA** que **MEGAMEDIOS SRL**, Registro Nacional de Contribuyente (RNC) No. **124003921** está inscrito con las siguientes informaciones:

DIRECCIÓN:	**AVENIDA 27 DE FEBRERO, NO. 371, APTO. MEGAMEDIOS S.A., DEL SECTOR BELLA VISTA DE LA CIUDAD DE SANTO DOMINGO DE GUZMAN.**
CONDICIÓN:	**CONTRIBUYENTE**
ESTADO:	**ACTIVO**
ACTIVIDAD(ES) ECONOMICA(S):	**SERVICIOS DE TRANSMISIÓN DE RADIO Y TELEVISIÓN**
RÉGIMEN DE PAGO:	**ORDINARIO**
CATEGORÍA(S):	**NO DISPONIBLE**

La presente certificación tiene una vigencia de treinta (**30**) días a partir de la fecha. La misma no constituye un juicio de valor sobre la veracidad de las informaciones declaradas, ni excluye cualquier proceso de verificación posterior.

Dada en la OFICINA VIRTUAL, a los **uno (1) días del mes de julio del año dos mil veinticuatro (2024)**.

Código de firma: W1G4-QNXC-6JZ1-7198-5107-5076
sha1: [illegible]
DGII - OFICINA VIRTUAL
DIRECCION GENERAL DE IMPUESTOS INTERNOS
DIRECCION GENERAL DE IMPUESTOS INTERNOS

W1G4-QNXC-6JZ1-7198-5107-5076

La Certificación de Registro es un documento que presenta las principales informaciones de registro de contribuyentes y registrados, tal cual se encuentran en nuestros sistemas de información tributaria.
Condiciones de inscrito: (a) registrados y (b) contribuyentes.
(a) Realizan algún trámite, ciertas operaciones o efectúan declaración o pago de un impuesto o tasa ocasional.
(b) Desarrollan actividad(es) económica(s) que conlleva la presentación periódica de obligaciones tributarias.
Verifique la legitimidad de la presente certificación en http://www.dgii.gov.do/verifica o llamando a los teléfonos 809-689-3444 y 1-809-200-6060.

Tu contribución es nuestro principio

Dirección General de Impuestos
Av. México #48, Gascue, Santo Domingo República Dominicana,
C.P. 10204 RNC: 401-50625-4

T. 809-689-2181
dgii.gov.do

logo
Internal Revenue

emblem
Dominican Republic
Department Of Treasury

REGISTRY CERTIFICATION

No.: C0424007392271

The General Directorate of Internal Revenue **CERTIFIES** that **MEGAMEDIOS SRL**, National Taxpayer Registration (R.N.C.) No. **124003921** is registered with the following information:

ADDRESS:	**AVENIDA 27 DE FEBRERO, NO. 371, APT. MEGAMEDIOS S.A., BELLA VISTA SECTOR OF THE CITY OF SANTO DOMINGO DE GUZMAN**
TYPE:	**TAXPAYER**
STATUS:	**ACTIVE**
BUSINESS ACTIVITY:	**RADIO AND TELEVISION BROADCASTING SERVICE**
PAYMENT SYSTEM:	**STANDARD**
CATEGORY(IES):	**NOT AVAILABLE**

This certification is valid for thirty (30) days from the issue date. It does not constitute a value judgment on the veracity of the information declared, nor does it exclude any subsequent verification process.

Given in the VIRTUAL OFFICE, on the **first (1st) day of the month of July of the year two thousand and twenty-four (2024).**

QR CODE

Signature code: W1G4-QNXC-6JZ1-7198-5107-5076
sha1: P6013dHLsIEQHDdFuus4UZg78U=
DGII (General Directorate of Internal Revenue) – VIRTUAL OFFICE
GENERAL DIRECTORATE OF INTERNAL REVENUE
GENERAL DIRECTORATE OF INTERNAL REVENUE
(Bar Code) W1G4-QNXC-6JZ1-7198-5107-5076

The Registry Certification is a document that presents the main registration information of taxpayers and registered parties, as found in our tax information systems.
Registration types: (a) registered and (b) taxpayers.
(a) Carry out some procedure, certain operations or make a declaration or payment of a tax or occasional fee.
(b) They develop economic activity(ies) that entails the periodic presentation of tax obligations.
Verify the legitimacy of this certification at **http://www.dgii.gov.do/verifica** or by calling 809-689-3444 and 1-809-200-6060

"Certificate of Translator's Competence"

I, **Felix Taveras**, hereby certify that the accompanying [illegible] and correct translation of the original Certification from Spanish to English, and that I am competent to perform such translation.

Translator's Signature

Notary Public State of Florida
Felix J Suriel
My Commission HH 109696
Expires 04/05/2025

State of Florida)
County of Dade)
The foregoing instrument was acknowledged to
before me by means of physical presence
this 1 July 2024
by Felix Taveras
Personally known to me [ ] or produced identification [ ]
Type or ID produced:

Notary Signature