PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION **FOR** REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

**DIVISION OF CORPORATIONS** 

FILED

99 DEC 23 AHII: 15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Corporation Name

Miami-Auto Sport, Inc.

Principal Place of Business

Mailing Address

2103 SW 22nd St., Suite 111 Miami, FL 33145

2103 SW 22nd St., Suite 111 Miami, FL 33145

If above addresses are incorre	ct in any way, lìne throu	gh incorrect information a	nd enter correction below.	KEINS ATEN	1EN 14-41
2. New Principal Office Address 2103 SW 22nd Str Suite, Apt. #, etc.	et	New Mailing Office Ad N/A Suite, Apt. #, etc.	ddress, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida July 14, 1970	
Suite 111 City & State		City & State		5. FEI Number 59–1308416	Applied For
Miami, FL  Zip Cour  33145 U:	try	Zip	Country	6. CERTIFICATE OF STATUS DESIRED	Not Applicabl

7. Names	and Street Addresses of Each Officer and/or Dire	ctor (Florida nonprofit corporations must list at least 3 directors)	
Title(s)	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	Lilliam E. Huerta	2103 SW 22nd St., Suite 111	Miami, FL 33145
S	Isidro Huerta	2103 SW 22nd St., Suite 111	Miami, FL 33145
<u>V &amp; T</u>	Yolanda Roodenburg	2103 SW 22nd St., Suite 111	Miami, FL 33145
		30	0003088063 -01/04/0001087020
			***1500.00 ***1500.0

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Isidro Huerta 2103 SW 22nd St., Suite 111 Miami, FL 33145	Name 1sidro Huerta Street Address (P.O. Box Number is Not Acceptable) 2103 SW 22nd St., Suite Suite, Apt. #, Etc. Suite 111
	City State Zip Code Miami FL 33145
Signature of Registered Agent  Isidro Huertal REGISTERED AGENT MUST SIGN	th and accept the obligations of Section 607.0505, F.S.  Date December 13, 1999
11. This corporation owes the current year Intangible Personal Property Tax due June 30.	Yes No xx (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 filling 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 have the same legal effect as if made under oath. on this application is true and accurate, and my signature shall

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 567 000

Isidro Huerta, Secretary