

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING **APPROVED**

**APPLICATION  
FOR  
REINSTATEMENT**



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

**AND  
FILED**

1997 MAY 19 PM 3:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 763128**

1. Corporation Name

**MIAMI INTERNATIONAL MALL MERCHANTS ASSOCIATION,  
INC.**

Principal Place of Business

1455 NW 107TH AVE  
MIAMI FL 33172

Mailing Address

1455 NW 107TH AVE  
MIAMI FL 33172

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

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

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

04/30/1982

5. FEI Number

50-2225683

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	<del>CRISTOBOL, LUIS</del> Lloyd Kurtzman	1455 NW 107TH AVE.	MIAMI FL
VPD	<del>O'DONOVAN, ED</del> Ileanne Dautreppe	1455 NW 107TH AVE.	MIAMI FL
VP	<del>OSORIO, MARCEL</del>	1455 NW 107TH AVE.	MIAMI FL
TD	<del>TURNER, JOHN</del> Henry Camacho	1455 NW 107TH AVENUE	MIAMI FL
SD	<del>WOODLEY, THOMAS</del> Norman Spaulding	1455 NW 107TH AVENUE	MIAMI FL

**REINSTATEMENT**

8. Name and Address of Current Registered Agent

WOODLEY, THOMAS  
1455 NW 107TH AVE.  
SUITE 508  
MIAMI FL 33172

9. Name and Address of New Registered Agent

Name  
**Norman Spaulding**  
Street Address (P.O. Box Number is Not Acceptable)  
1455 NW 107th Avenue,  
Suite, Apt. #, Etc.  
#596  
City  
Miami  
Date  
05/22/97  
State  
FL  
Zip  
33172

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

*Norman Spaulding*  
REGISTERED AGENT MUST SIGN

Date Oct 15, 1996

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NORMAN W. SPAULDING

1-22-97

Date

1-305-593-1777

Daytime Phone #