

112

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

2006 SEP 29 PM 12:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F03000061027

1. Corporation Name

Millennium Designs, Inc.

2. Principal Office Address

3602 Bolin Road

Suite, Apt. #, etc.

City & State

Houston, TX

Zip

77092

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

Country

600080292296

REINSTATEMENT

CR2E081 (12/05)

05-06

4. Date Incorporated or Qualified
To Do Business in Florida

1/19/99

5. FEI Number

76-0650246

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301-2525

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Harry B. Davis

Harry B. Davis
Asst. Vice President

Date

9/29/06

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/S	Jeannie Rich Chandler	246 Stoney Creek	Houston, TX 77024
V/T	Wendy Mitchell Martin	16031 Rudgewick Lane	Spring, TX 77379

10. 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 contained in Chapter 119, 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

Jeannie Rich Chandler

Date

9/28/06

Daytime Phone #

713.263.0064

929



CORPORATION SERVICE COMPANY

212

ACCOUNT NO. : 072100000032

REFERENCE : 490715 7463390

AUTHORIZATION :

COST LIMIT :

[Signature]
\$900

ORDER DATE : September 29, 2006

ORDER TIME : 9:45 AM

ORDER NO. : 490715-005

CUSTOMER NO: 7463390

REINSTATEMENT

NAME: MILLENNIUM DESIGN, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis

EXAMINER'S INITIALS _____

RECEIVED
06 SEP 29 AM 10:43
TALLAHASSEE
FLORIDA