

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

03 MAR 26 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

Millenium Enterprise Group, Ltd. Corporation #F99000002944

400015279244
04/03/03--01013--024 **150.00

REINSTATEMENT 02-03

2. Principal Office Address

3201 34th Street South

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

Zip

33711

Country

USA

3. Mailing Office Address

3311 East Old Shakopee Road

Suite, Apt. #, etc.

City & State

Minneapolis, MN

Zip

55425

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida June 8, 1999

5. FEI Number

22-3657048

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

NRAI Services, Inc.

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

526 E. Park Avenue

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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.

NRAI Services, Inc.

Signature of
Registered Agent

BY:

Michael L. Turo

Date

3/25/03

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
D	Sharon A. Stein	3311 East Old Shakopee Road	Minneapolis, MN 55425
P	Jeffrey Chase	300 Embassy Row	Atlanta, GA 30328
V/S	Mark Smith	46 Clairhaven Drive	Hudson, OH 44236

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 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:

Jeffrey Chase
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey Chase, President

02/25/2003

Date

952-853-7683

Daytime Phone #

CR2E081 (9/01)

3/26