

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

98 DEC 23 PM 4:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G87699**

1. Corporation Name

W.J. MIRANDA CONSTRUCTION CO.

Principal Place of Business

Mailing Address

SAMUEL STEEN, P.A.
1500 San Remo Avenue, Suite 215
Coral Gables, Florida 33146-3047

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

2. New Principal Office Address, If Applicable

~~10598 NW South River Dr.~~
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

~~10598 NW South River Dr.~~
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

1/16/84

5. FEI Number

59-2359182

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

City & State

Medley, Florida

City & State

Medley, Florida

Zip

33178

Country

US

Zip

33178

Country

US

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PDT	WILLIAM J. MIRANDA	10598 NW South River Dr.	Medley, FL 33178

REINSTATEMENT 96-98

5-12-25-98

8. Name and Address of Current Registered Agent

Steen, Samuel
1500 San Remo Avenue
Suite 215
Coral Gables, Florida 33146

9. Name and Address of New Registered Agent

Name
Raymond L. Robinson, Esq.
Street Address (P.O. Box Number is Not Acceptable)
1501 Venera Avenue, Suite 300
Suite, Apt. #, Etc.
Suite 300
City
Coral Gables
State
FL
Zip Code
33146

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 12-21-98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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] William J Miranda
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/21/98

Date

305 883 1920

Daytime Phone #

CR2040 (1/98)



ACCOUNT NO. : 072100000032

REFERENCE : 078002 164938A

AUTHORIZATION :

COST LIMIT :

\$ 1038.93

Patricia Pruitt

ORDER DATE : December 23, 1998

ORDER TIME : 3:41 PM

ORDER NO. : 078002-005

CUSTOMER NO: 164938A

CUSTOMER: Jackie Ballate, Legal Asst
Robinson & Associates, P.a.
Suite 300
1501 Venera Avenue
Coral Gables, FL 33146

DOMESTIC FILINGS

NAME: W.J. MIRANDA CONSTRUCTION CO.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Robert Maxwell

EXAMINER'S INITIALS _____