

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**APPLICATION
FOR
REINSTATEMENT**



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

APPROVED
AND
FILED

1997 NOV 24 AM 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K22049

1. Corporation Name
NEW ADVANTAGES OF MIAMI, INC.

Principal Place of Business
**1121 S.W. 122ND AVENUE
APARTMENT 214
MIAMI FL 33184**

Mailing Address
**1121 S.W. 122ND AVENUE
APARTMENT 214
MIAMI FL 33184**



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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/27/1988	
City & State		City & State		5. FEI Number	
Zip		Country		65-0049820	
				Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$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)

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
PSTD	HERNANDEZ, ANSELMO	1121 S.W. 122ND AVE., #214	MIAMI FL 33184

800002358088 -- 1
11/28/97-01087-002
****165.00 ****165.00

7/18/97
11/24/97

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
SARIOL, MARIA D ESQ. 2801 PONCE DE LEON BLVD. SUITE 1170 CORAL GABLES FL 33134		Name: Anselmo Hernandez Street Address (P.O. Box Number is Not Acceptable): 1121 SW 122 Ave #214 Suite, Apt. #, Etc.: #214 City: Miami State: FL Zip Code: 33184	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0506, F.S.

Signature of Registered Agent: *Anselmo Hernandez* Date: 11-19-97
REGISTERED AGENT MUST SIGN

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: *Anselmo Hernandez*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-19-97
305-PPR
9485
Date: Daytime Phone #

CR2E040 (8/97)

(2)

November 5, 1997

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

Ref.: New Advantages of Miami, Inc.

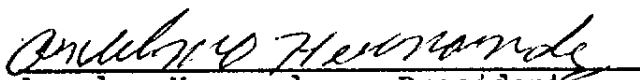
Dear Sir (Madam):

Enclosed please find my Corporation Annual Report and my check for \$165.00.

I called your office and explained that I had not received the Corporation Annual Report. I was told that the penalty would be waived but that next year it would not.

Thank you very much for your understanding and please accept my apology for this inconvenience.

Sincerely,


Anselmo Hernandez - President