

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

99 DEC 22 PM 12:5

SECRETARY OF STATE  
TALLAHASSEE, FL

DOCUMENT # M93602

1. Corporation Name

MIAMI TOOL & MACHINE CORP.

Principal Place of Business

Mailing Address

7470 NW 82ND ST  
MIAMI FL 33166  
US

7490 NW 82ND ST.  
MIAMI FL 33166  
US

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

08/04/1988

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0092005

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED

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 3	City / State / Zip 4
PD	GOOL, DANIEL JOHN	18326 NW 68 AVE, APT 14-J	MIAMI FL

800003087538--1  
-01/04/00--01064--007  
\*\*\*\*750.00 \*\*\*\*750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GOOL, DANIEL  
18326 N.W. 68TH AVENUE, APT. 14-J  
MIAMI FL 33015

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

*Daniel J. Gool*  
SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date 12-17-99

11. 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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Daniel J. Gool*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL J. GOOL

12-17-99 305-884-8061  
Date Daytime Phone #