

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

02 SEP 18 PM 1:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

700007902317--5

-09/20/02--01077--003

\*\*\*\*150.00 \*\*\*\*150.00

8/16/01 90002 019 \$150.00

**DOCUMENT # PO0000007139**

**1. Corporation Name**

**MIAMI INTENATIONAL COMPLIANCE, INC**

**2. Principal Office Address**

**2801 NW 74TH AVE**

**Suite, Apt. #, etc.**

**213**

**City & State**

**MIAMI, FL**

**Zip**

**33122**

**Country**

**USA**

**3. Mailing Office Address**

**P.O. BOX 524076**

**Suite, Apt. #, etc.**

**City & State**

**MIAMI, FL**

**Zip**

**33152**

**Country**

**USA**

**4. Date Incorporated or Qualified  
To Do Business in Florida**

**01-21-00**

**5. FEI Number**

**65-0974973**

**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**

**LUIS A. MARQUEZ**

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

**8333 LAKE DR.**

**Suite, Apt. #, Etc.**

**L306**

**City**

**MIAMI**

**State  
FL**

**Zip Code**

**33166**

**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**

**REGISTERED AGENT MUST SIGN**

**Date 09/13/02**

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

<b>Titles</b>	<b>Name of Officers and/or Directors</b>	<b>Street Address of Each Officer and/or Director</b>	<b>City / State / Zip</b>
<b>P.</b>	<b>LUIS A. MARQUEZ</b>	<b>8333 LAKE DR. #L306</b>	<b>MIAMI, FL 33166</b>
<b>D.</b>	<b>LUIS E. SANCHEZ</b>	<b>15453 SW 68 LANE</b>	<b>MIAMI, FL 33193</b>

**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:**

**LUIS A. MARQUEZ/OFFICER**

**09/13/02**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Date**

**Daytime Phone #**



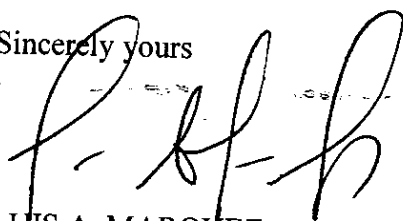
Department of State  
September 13, 2002  
Miami, Fl

To Whom It May Concern:

As per our conversation September 13, 2002 a rejection letter was mailed on August 15, 2001 requesting a late fee of \$400 dollars. MIAMI INTL COMPLIANCE never received a rejection or any original business report letters from your office. Your office did receive and deposited a check from MIAMI INTL COMPLIANCE on August 15, 2001 for the amount of \$150.00 dollars.

I LUIS A. MARQUEZ President of MIAMI INTL COMPLIANCE request you waive any penalty fees for this misunderstanding.

Sincerely yours

  
LUIS A. MARQUEZ  
President

micdg@bellsouth.net  
phone: 305.718.3551  
fax: 305.718.3553

Miami International Compliance, INC.  
P.O. Box 524076, Miami, Florida 33152

2801 NW 74th Avenue, Suite 107  
Miami, Florida 33152