

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 NOV -9 PM 7: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000011485

1. Corporation Name

MILLENNIUM MACHINE SHOP, INC.

Principal Place of Business

Mailing Address

8461 NW 54TH STREET
MIAMI FL 33166

8461 NW 54TH STREET
MIAMI FL 33166

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/28/2000

5. FEI Number

65-0978519

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$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	4 City / State / Zip
D/p/s	DIAZ, NORBERTO	8461 NW 54TH STREET	MIAMI FL 33166
D	PENA, LUIS	8461 NW 54TH STREET	MIAMI FL 33166
			700004706467--3 -12/05/01--01057--039 ***150.00 ***150.00

8. Name and Address of Current Registered Agent

GURIAN, JORGE L
7101 SW 102ND AVE.
MIAMI FL 33173

9. Name and Address of New Registered Agent

Name
Gurian, Jorge L.
Street Address (P.O. Box Number Not Acceptable)
2100 Ponce de Leon Boulevard
Suite, Apt. #, Etc.
Suite 600
City
Coral Gables
State
FL
Zip Code
33134

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

REGISTERED AGENT MUST SIGN

Date 11/06/01

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Norberto Diaz

11/06/01

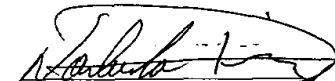
305-465-7797

292

TO: FLORIDA DEPARTMENT OF STATE

REF: MILLENNIUM MACHINE SHOP, INC.

I NORBERTO DIAZ PD OF MILLENNIUM MACHINE SHOP INC, I RECENTLY OPENED THESE CORPORATION THE EXACT DAY IS 01/28/2000, WHERE I OPENED THESE CORP I WAS NEVER TOLD THAT THERE IS A RENOVATION FEE EVERY YEAR AND SINCE AM NEW IN THESE BUSINESS I WAS NOT AWARE OF THE PAYMENT OF EVERY YEAR, AT THESE TIME AM GOING TO SEND THE REGULAR \$150.00 OF EVERY YEAR SINCE I ALSO DIDN'T RECEIVE THE FORM, I JUST RECEIVE THE FORM THAT AM SENDING NOW WHICH IS A FORM OF ADMINISTRATIVE DISSOLUTION, I WOULD LIKE FOR THESE MATTER TO BE TAKEN CARE AS SOON AS POSSIBLE AND I APOLOGIZED FOR THE INCONVINIECE THESE WOULD NOT HAPPEND ANY MORE NOW THAT I KNOW WHEN IS THE DAY TO SEND MY RENOVATION FEE. IF YOU HAVE ANY QUESTION REGARDING THESE MATTER FEEL FREE TO CALL ME AT 305-468-9797. THANK YOU


MILLENNIUM MACHINE SHOP
NORBERTO DIAZ, PRESIDENT