

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 1082

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000013971

1. Corporation Name

MSI MIAMI CORP.

Principal Place of Business

Mailing Address

2001 N.W. 84TH AVENUE
MIAMI FL 33126

2001 N.W. 84TH AVENUE
MIAMI FL 33126

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

02/09/2000

5. FEI Number

65-0980533

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	SHIH, CHEN-WAI	2001 N.W. 84TH AVENUE	MIAMI FL 33126
DT	WU, LARRY	2001 N.W. 84TH AVENUE	MIAMI FL 33126
D	LIU, CHU-HAO	2001 N.W. 84TH AVENUE	MIAMI FL 33126
S	LIN, CHI-HAO	2001 N.W. 84TH AVENUE	MIAMI FL 33126
AS	PAN, JOANNE	2001 N.W. 84TH AVENUE	MIAMI FL 33126

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

SHIH, JUSTIN

2001 N.W. 84TH AVENUE

MIAMI FL 33126

000029870820

10/17/03-01022-022 **150.00

FL

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. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]
REGISTERED AGENT MUST SIGN

Date 10.13.03

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

see letter attached 10.13.03

CR2E040 (7/03)



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MSI Miami, Corp.

A MICRO STAR INT'L CO.

2001 North West 84th Avenue • Miami, FL 33122

Tel: 305-591-2229 • Fax: 305-591-9929 • <http://www.msimiami.com>

Ref : P00000013971

To : Whom it may concern

From : MSI Miami Corp.

This letter is issued to apply for the waiver on the reinstatement fee and other charges. The reason that we didn't submit the 2003 corporate annual report/uniform business report in a timely manner is because we have never received the report so far.

Please kindly approve our request and waive all the reinstatement charges accordingly.

Your immediate attention to this matter is greatly appreciated.

Thanks and best Regards

Sincerely yours,

Joann Pan / Office Manager
MSI Miami Corp.