

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10fz

APPLICATION FOR REINSTATEMENT

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



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 01 NOV 20 PM 5:30

DOCUMENT # **P00000031624**

1. Corporation Name
MILLENNIUM BUYER'S AND LESSOR'S CLUB, INC.

Principal Place of Business Mailing Address

13696 COLUMBINE AVE. SUITE 200 13696 COLUMBINE AVE. SUITE 200
 WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414



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 **03/23/2000**

5. FEI Number Applied For

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	VALENCIA, HERBERT M	13696 COLUMBINE AVE, SUITE 200	WEST PALM BEACH FL 33414

~~300004706313-3~~
 -12/05/01--01063--015
 ****150.00 ****150.00

H/12/13

8. Name and Address of Current Registered Agent

VALENCIA, HERBERT M
 13696 COLUMBINE AVE, SUITE 200
 WEST PALM BEACH FL 33414

9. Name and Address of New Registered Agent

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: *[Signature]* Date: **10/29/01**

REGISTERED AGENT MUST SIGN

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: **HERBERT M. VALENCIA** *[Signature]* Date: **10/20/01** Daytime Phone #: **561 798-3885**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2040 (8/01)

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MILLENNIUM BUYER'S & LESSOR'S CLUB, INC.

13696 Columbine Avenue
Suite 200
Wellington, FL 33414-8146
561.798.3185 Fax 561.791.4656
hmvalenci@adelphia.net

October 23, 2001

Divisions of Corporations
Annual Report/Reinstatement Section
POB 6327
Tallahassee, FL 32314-6327

To Whom It May Concern:

Enclosed is an application for reinstatement for my company. I request a waiver of the \$600.00 fee because the first notice I received was the Notice of Administrative Dissolution. We receive a great deal of "junk mail" and most probably any earlier notices may have been discarded by mistake. In any case, I did not receive any prior notices.

Enclosed is the annual fee of \$ 150.00. Thank you for your assistance.

Cordially,



Herbert M. Valencia
President