

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P01000037887

1. Corporation Name

MIA & COMPANY INC.

Principal Place of Business

2620-C MANATEE AVE W
BRADENTON FL 34205

Mailing Address

2620-C MANATEE AVE W
BRADENTON FL 34205

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

04/13/2001

5. FEI Number

04-3635790

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)

2

Name of Officers
and/or Directors

3

Street Address of Each
Officer and/or Director

4

City / State / Zip

Pres, HAROLD B. BENZ

2620 Suite C Manatee
Ave. West

Bradenton FL.
34205

05/14/02 90774 001

\$150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

STEPHENS, MARY L

6318 6 STREET W

BRADENTON FL 34205

ALBERTHA MA Randall
3312 34th Ave Dr.
West Bradenton
Florida 34205

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. or 617.0505, F.S.

Signature of
Registered Agent

~~REGISTERED AGENT REQUIRED~~

REGISTERED AGENT MUST SIGN

Date 10-22-02

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 REQUIRED~~

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oct, 23, 2002

Date

Daytime Phone #

CR2040 (8/02)

2 of 2

MIA & COMPANY, INC.
2620-C MANATEE AVENUE WEST
BRADENTON, FL 34205

November 13, 2002

Justin M. Shivers
Document Specialist
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Mia & Company, Inc.
Ref. # P01000037887

Dear Mr. Shivers:

Once again I received the enclosed documents from the Department of State, and once again I reiterate that I timely filed the annual report for Mia & Company; and I timely paid the appropriate fees, which the Department of State has acknowledged. I never received any "rejection form". The only notice I received was the October 4, 2002 "Certificate of Administrative Dissolution or Revocation. Upon receipt of that document, I promptly called the Department of State and was advised that the annual report and payment was in fact received, and I should send a letter notifying the Department of State that I never received a "rejection form" and request that the fees for reinstatement be waived since it appeared to be an error on the part of the Department of State.

I am once again requesting that you reinstate Mia & Company, Inc. and waive any and all reinstatement fees.

If you have any questions, please contact me as this is very distressing and I certainly wish to have it cleared up at once.

Thank you for your courtesy.

Sincerely,



HARALD B. BENZ