

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 24 PM 1:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000096364

1. Corporation Name

MIAMI SCHOOL OF BROKERS, INC.

Principal Place of Business

Mailing Address

10701 SW 67TH TERR  
MIAMI FL 33173

10701 SW 67TH TERR  
MIAMI FL 33173

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

4. Date Incorporated or Qualified  
To Do Business in Florida

10/03/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-1146743

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	BENVENUTO, ATTILIO M	10701 SW 67TH TERR	MIAMI FL 33173

600008573876  
10/24/02--01089--005 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BENVENUTO, ATTILIO M  
10701 SW 67TH TERR  
MIAMI FL 33173

Name

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

Suite, Apt. #, Etc.

City

*Brokers*

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

*Signature required*  
REGISTERED AGENT MUST SIGN

Date

10-22-2002

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.

ATTILIO BENVENUTO

SIGNATURE:

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

Date

Daytime Phone #

10-22-2002

305  
4911656

CR2E040 (8/02)

# **MIAMI SCHOOL OF BROKERS, INC.**

10701 SW 67 Ter. Miami, fl. 33173 Ph. 305 - 491 1656 Fax 305 - 271 64 93

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Miami, October 22, 2002

Florida Department of State

Division of corporations

Tallahassee, Fl.

Dear Gentlemen:

By listening to the recording of the ph. # 850 - 245 6059 I learned that I could get from your web- site the form for the letter where to let you know that a previous application for reinstatement (UBR) had not been mailed to us before this one that arrived in our office yesterday afternoon.


I declare that no application has arrived before this one

Should it be necessary to file this statement in a special form, please be kind to mail it to us as soon as possible so we can act accordingly.

Please find attached to this letter the application for reinstatement and our check # 1076 for the amount of \$ 150.00

Thanking in advance, I remain

Sincerely yours

  
Attilio M. Benvenuto  
Director.