

102

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 DEC 23 AM 8:00

DOCUMENT # P02000015942

1. Corporation Name

Mitchell's Distinctive Furniture Designs, Inc.

**REINSTATEMENT** 03

700025733207  
12/23/03--01051--006 \*\*150.00

2. Principal Office Address

5920-22 Lee Street

3. Mailing Office Address

5920-22 Lee Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hollywood, Florida

City & State

Hollywood, Florida

Zip

33021

Country

USA

Zip

33021

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

02/02/2002

5. FEI Number

30-0044506

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Sydney V. Mitchell

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

3651 Turtle Run Blvd.

Suite, Apt. #, Etc.

Apt. 822

City

Coral Springs

State

FL

Zip Code

33067

*MSB*

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*Sydney Mitchell*

REGISTERED AGENT MUST SIGN

Date 12/17/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Sydney V. Mitchell	3651 Turtle Run Blvd. Apt. 822	Coral Springs, FL 33067
V President	Martin Mitchell	1020 NE 27th Ave	Pompano Beach, FL 33062
Secretary	Martin Mitchell	1020 NE 27th Ave	Pompano Beach, FL 33062
Treasurer	Martin Mitchell	1020 NE 27th Ave	Pompano Beach, FL 33062

10. 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:

*Sydney Mitchell*

SYDNEY V. MITCHELL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 12/17/03

(954) 962-7442  
Daytime Phone #

CR2E081 (10/02)

292



# Mitchell's

Distinctive Furniture Designs

---

## Petition for waiver

Mitchell's Distinctive Furniture Designs, Inc. is asking for a waiver regarding past due fees for annual report. Mitchell's Distinctive Furniture Designs, Inc. for 2003, never received Annual report fee and for that matter never paid it.

We have recently called the Florida department of State - Division of Incorporations and was instructed to send this letter and ask for a waiver along with \$150.00 to reinstate corporate status for Mitchell's Distinctive Furniture Designs, Inc.

Also please note on application the change of Address and Officers.

Thank you for your cooperation.



Sydney V. Mitchell  
President

12/17/03