

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 SEP -4 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000010193

1. Corporation Name

MILLMAN ENTERPRISES INC

2. Principal Office Address

75 ERIC DRIVE

Suite, Apt. #, etc.

City & State

PALM COAST, FLORIDA

Zip

32164

Country

3. Mailing Office Address

SAME AS #2

Suite, Apt. #, etc.

City & State

SAME AS #2

Zip

#2

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

1-14-05

5. FEI Number

20-2220217

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 06-07

7. Name and Address of Current Registered Agent

Name

JENNIFER MILLMAN

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

75 ERIC DRIVE

Suite, Apt. #, Etc.

City

PALM COAST

State

FL

Zip Code

32164

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

REGISTERED AGENT MUST SIGN

Date AUGUST 25, 2007

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
P,T,D	MATTHEW MILLMAN	75 ERIC DRIVE	PALM COAST, FL 32164
S,VP,D	JENNIFER MILLMAN	75 ERIC DRIVE	PALM COAST, FL 32164

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:

JENNIFER MILLMAN, SEC

8-25-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/05)

August 24, 2007

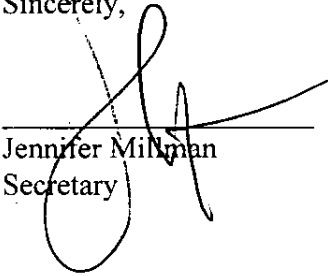
Re: Millman Enterprises, Inc.
Reinstatement

To Whom it May Concern,

Enclosed please find my reinstatement form as well as a check for \$300.00 to bring my corporation up to date thru 2007. I had not ever received a renewal and I believe it may be due to an incorrect address. My new address can be found on the reinstatement paperwork.

Thank you for your time in this matter.

Sincerely,



Jennifer Millman
Secretary

8/27/07