PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

0	PAIR			ARTMENT etary of Stat of corporat	e			FIL JUL 27 REJARY	PM 3:		
DOCUMENT # <i>P05000111292</i> 1. Corporation Name							CALLAHASSEE, FLORIDA				
-	AMI BEST G	ALAGE	DOORS, I	wc.							
,							300078281033 08/02/0601062012 **150.00				
2. Principal Office Address 9500 N.W. 79 AVE			3. Mailing Office Address 9500 NW 79AVE			CR2E081 (12/05)					
Suite, Apt. #, etc. <i>BAY #17</i>			Suite, Apt. #, etc. BAY #17			Date Incorporated or Qualified To Do Business in Florida					
HIALEAH; FLORIDA.			City & State HIALEAH, FLORIDA.			5. FEI Number Applied For Not Applicable					
Zip 330/6 Country DADE.			33016 Country DADE.			6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status					
			7. Name a	and Address of	Current Register	red Agent					
	Name CARMEN K. SOSA.										
	Street Address (P.O. Box Number is Not Acceptable) 9500 NW 79 ave Suite, Apt. #, Etc.										
	Suite, Apt. #, Etc.										
	City HIALEAH.						State Zip Code FL 330/6 .				
	appointed the registered ac	gent of the abov	e named corporation	, am familiar with	and accept the o	bligations of section					
Signature of Registered Agent							Date <u>07-24-06</u> .				
9. Names	and Street Addresses of E				ions must list at le	east 3 directors)					
Titles	Na Officers an		Street Address of Each Officer and/or Director			City / State / Zip					
PD	SUSA, CAR	ARINA 95	9500 NW 77 AVE #17			HIALEAH, FL 33016.					
TD	BELTRAN, BELNAGE.			9500 NW 79 AVE #17			HIDLEAH, PL 330/6.				
		16	74/1					- 11-11			
				 .							
this rei	y that I am an officer or direct instatement application, the by the corporation have been application is true and accu	reason for disso n paid and the r	olution has been eliminated and lands literated and lands literate	nated, the corpor sted on this form	ate name satisfie do not qualify for	s the requirements an exemption con er oath.	of section tained in (607.0401 or Chapter 119, I	617.0401, É	.S., that all fees	
SIGNA		- 4	Di telle	Kalo		07	-24 Date	-06			
	SIGNATURE ANI	D TYPED OR PRI	TED NAME OF SIGNIN	OFFICER OR B	RECTOR	"	Date		Daytime P	hone #	

July 24, 2006

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Miami Best Garage Doors, Inc.

Dear Sir/Madam:

As instructed by one of the division's agen't, I am sending this letter to explain the reason for waiving the late fee. Our office has not received the annual report mailed by your office to renew the corporation mentioned above. Please note our address in your records to confirm that it is correct. We have enclosed a check for \$ 150.00 for the year 2006.

I kindly ask of you to waive the current penalties pending on the corporation. Should you have any questions regarding the foregoing, please contact the undersigned.

Sincerely,

Carmen K Sosa (President Director) Miami Best Garage Doors, Inc.

9500 NW 79 AVE Bay # 17

Hialeah, FL 33016