

2007 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED
AND
FILED

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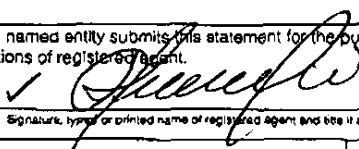
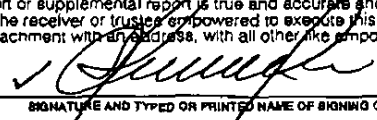
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-27-07

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1120007 REINSTATEMENT 07

DOCUMENT # P06000072050					
1. Entity Name KELLY MICIELI, P.A.					
Principal Place of Business 7516 SW 191 Street Miami, FL 33157			Mailing Address 7516 SW 191 Street Miami, FL 33157		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent MICIELI, KELLY 7516 SW 191 Street Miami, FL 33157				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MICIELI, KELLY 7516 SW 191 Street Miami, FL 33157	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			11/20/07 Date Daytime Phone #		

Kelly Micieli, P.A.
7516 SW 191 Street
Miami, Fl 33157

November 20, 2007

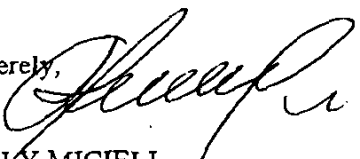
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

Re. Kelly Micieli, P.A.
FEIN#: 20-4917191

Dear Sir/ Madam:

Enclosed please find "For Profit Corporation Reinstatement" for the year 2007 along with the FEI Number. After a brief conversation with a representative on today's date, It was brought to my attention that my filing had not been accepted for failure to include FEI Number on Box number 4 of my 2007 Annual Report. I was not aware of this issue since no prior notices were received in reference to this matter. I am submitting a reinstatement for my company, Kelly Micieli, P.A. in order for it to be active with the state of Florida.

Sincerely,


KELLY MICIELI