PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLCATION · FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P93000048394 DOCUMENT #

1. Corporation Name

MILLER ENGINEERING INC

Principal Place of Business

Mailing Address

1777 BLOUNT RD

1777 BLOUNT RD

#501



DIVISION OF CORPORATE

03 OCT 3 / PM 3: 11

POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 2. New Principal Office Address, If Applicable Date Incorporated or Qualified
To Do Business in Florida 07/01/1993 Suite, Apt. #, etc. Suite, Apt, #, etc. 5. FEI Number Applied For City & State City & State 65-0424947 Not Applicable S8.75 Additional Fee required Zip Country Zip Country CERTIFICATE OF STATUS DESIRED 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) Name of Officers Street Address of Each City / State / Zip Title(s) Officer and/or Director and/or Directors POMPANO BEACH FL 33069 PS MILLER, J. M. CEO 1777 BLOUNT ROAD, SUITE NO. 501 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent CHAIRT MILLER, J. M. Street Address (P.O. Box Number is Not Acceptable 5440 1777 BLOUNT RD #501 Suite, Apt. #, Etc POMPANO BEACH FL 33069 Zip Code 33319 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 REGISTERED AGENT MUST SIGN

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2

MILLER ENGINEERING INC M E I

October 2, 2002

DEPARTMENT OF STATE DIVISION OF CORPORATIONS 409 East Gaines St.

850-488-9000

Tallahassee, FL 32399

RE: Uniform Business Report

MILLER ENGINEERING INC (Filing Number: P93000048394)

Dear Sir/Madam:

Please find enclosed a Uniform Business Report, following my inquiry today of our status, as we had not received a form for this year. Per your representative's instructions, this has been downloaded from your site and printed on our color printer. Please update with the new officers shown. A check for the \$150,00 FEE has been attached.

Thank you for your consideration. Sincerely,

J.M. Miller President

Att.