PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

97 NOV 10 PM 12: 12

FILED

DOCUMENT # P93000077343 1. Corporation Name AIDNIGHT OIL DESIGNS, INC.						SECRETARY OF STATE TALLARYSESSE, FLORIDA			
•	Place of Business 70TH YERRACE 3173	10933 S.W. 707	Malling Address 10933 S.W. 70TH TERRACE MIAMI FL 33173 through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable						
2. New P	rincipal Office Address, If Applicable	3. New Mailir				4. Date Incor To Do Bus	Date Incorporated or Qualified To Do Business in Florida 11/02/1993		
Suite, Apt.		City & State	Sulte, Apl. #, etc. City & State			5. FEI Numb	^{er} 65-0447668		Applied For
Zip	Country	Zip		Country		6. CERTIFICA	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee require for a Certificate of Status		
7. Names	and Street Addresses of Each Officer		rida nonprofit						
Title(s)	Name of Officers and/or Directors 2		Street Address of Eac Officer and/or Directo 3 (Do NOT Use Post Office Box			th or Numbers) 4			
P	DUMLAO, M C		10933 SW 70 TERR			MIAMI FL			,
VT	MONROE, MICHELLE		10933 SW 70 TERR			MIAMI FL			
			100023 1919 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					674: -01085 0 ****	1 —— 7 021 ×165.00
								50	i 13-97
								11-1	13-97
8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent			
DUMLAO, M C 10933 S.W. 70TH TERRACE MIAMI FL 33173				Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.					
				City				tate Zip Co	ode
10. I, beir	ng appointed the registered agent of th	e above named corpo	oration, am far	l niliar with and ac	cept the o	bligations of Sec		- L	
Signature Registere	of d Agent	REGISTERED AG	ENT MUST'S	IGN			Date		
	his corporation owes o Itangible Personal Prop	r has paid th	e curren	t year	s 🗌	No 🗆		r side for Info Intangible tax	

12. 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:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 Nov 1997 305 666 1861
Date Daytima Phone # X7133





7 November, 1997

Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Hello.

Per my telephone conversation today with your office, I am sending another check and signing the Reinstatement form for the following corporation:

Midnight Oil Designs

FEI Number 65-0447668

According to my records, our company check #1502, dated 4/28/97, was cashed by the Department of State. I do not have a copy of the check, but I am requesting this from our bank.

In order to expediate the reinstatement process, I am sending this check #1564 for the same annual report fee that was paid earlier. Once I receive all copies and bank records, I will contact the Department of State for appropriate action.

Please contact me if you have any information that might help clear this matter up. My daytime phone is (305) 666-1861 x7133.

Thank you,

Michelle Monroe

10933

Southwest

70 Terrace

Miami

Florida

33173