

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

96 DEC 20 AM 9:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000045842

1. Corporation Name

MIRIAM TRADING, INC.

Principal Place of Business

Mailing Address

4748 S. FLORIDA AVE.  
LAKELAND FL 33813

4748 S. FLORIDA AVE.  
LAKELAND FL 33813

If above addresses are incorrect in any way, line through incorrect information and enter correction below.



REINSTATEMENT

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

06/20/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3249820

Applied For

Not Applicable

City & State

City & State

6.

CERTIFICATE OF STATUS DESIRED  \$9.75 Additional Fee required 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	MILLER, RODGER W	1506 SHERIDAN FOREST DR.	TAMPA FL 33629
STD	MILLER, PEGGY M	1506 SHERIDAN FOREST DR.	TAMPA FL 33629
VPD	MILLER, FRED H	1506 SHERIDAN FOREST DR.	TAMPA FL 33629

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\*\*\*383.75 \*\*\*383.75

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8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MILLER, RODGER W  
1506 SHERIDAN FOREST DR.  
TAMPA FL 33629

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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.

Signature of Registered Agent

*Rodger W. Miller* REGISTERED AGENT MUST SIGN

Date 12/17/96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No

(See other side for information on 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Rodger W. Miller*

12/17/96

Date

(813) 286-2432

Daytime Phone #