

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

00 JUN -6 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000055561 (2)

1. Corporation Name

M.Y.G. INC.

2. Principal Office Address

9200 S. Dadeland Blvd.

3. Mailing Office Address

9200 S. Dadeland Blvd.

Suite, Apt. #, etc.

Suite 515

Suite, Apt. #, etc.

Suite 515

City & State

Miami, FL

City & State

Miami, FL

Zip

33156

Country

USA

Zip

33156

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

7/25/1994

5. FEI Number

65-0512173

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

See Instructions for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Bruce Alexander

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

9200 South Dadeland Blvd.

Suite, Apt. #, Etc.

Suite 515

City

Miami

State
FL

Zip Code

33156

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 617.0503, F.S.

Signature of
Registered Agent

Bruce Alexander

REGISTERED AGENT MUST SIGN

Date

6/5/00

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles

Name of
Officers and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

Pres. Phillip Nassief

5825 Collins Ave.

Miami Beach, FL 33140

REINSTATEMENT

100003278461--2

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 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:

Phillip Nassief

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/5/00

Date

(305) 865-8203

Daytime Phone #

CR2E081 (9/99)



ACCOUNT NO. : 072100000032

REFERENCE : 721585, 7315303

AUTHORIZATION :

Patricia Pizzit

COST LIMIT : \$ 1200.00

ORDER DATE : June 6, 2000

ORDER TIME : 12:15 PM

ORDER NO. : 721585-005

CUSTOMER NO: 7215303

CUSTOMER: Bruce Alexander, Esq
Bruce Alexander, Attorney
Suite 515
9200 South Dadeland Blvd.
Miami, FL 33156

DOMESTIC FILINGS

NAME: M.Y.G., INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cindy Harris

EXAMINER'S INITIALS

RECEIVED
00 JUN -6 PM 1:02
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA