PLEASE BEAD	ALL INSTRUCTION	NS BEFORE (COMPLETING THIS FORMADVEL		
POLOTION (2)	FLORIDA DEPAR Sandra B	TMENT OF STATE . <mark>Mortham</mark>	AHD FILED	٠	
REINSTATIMENT	•	y of State ORPORATIONS	98 NOV 10 AM 11: 17		
DOCUMENT # PG7000056638			SECRETARY OF STATE FALL AHASSEE, FLORIDA		
Miami Sports Magazine, Inc.					
Principal Place of Business Mailing Address			_		
16600 SW 116 Street Pinecrest Florida 33156					
	- - · -				
If above addresses are incorrect in any way, line through incorrect information and enter col 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. FEI Number X Applied Fo	or .	
City & State	City & State		Not Applic		
Zîp Country	Zip	Country	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee rectificate of Sta		
7. Names and Street Addresses of Each Officer and Name of Officers Title(s) and/or Directors	or Director (Florida nonprofit)	Street Address of Each Officer and/or Director	ch		
3 (Do NOT US		NOT Use Post Office Box 1	Numbers) 4		
Pinecres		crest Fla 3	"" " " " " " " " " " " " " " " " " "	ت ا	
			300002689973 -11/18/9801002017 ****158.35 ****158.	;-9 95	
				-	
			Rulis		
			<u> </u>		
Andrew M. Hiller		Name	9. Name and Address of New Registered Agent		
6600 SW 116 Stre	et	Street Address (F	Street Address (P.O. Box Number is Not Acceptable) Suite, Ant #, Ftc.		
Pinecrest Fla 33156		Suite, Apt. #, Etc.	Suite, Apt. #, Etc.		
		City	City State Zip Code		
10. I, being appointed the registered agent of the abo		-		_	
Signature of Registered Agenty JRANIN A	GISTEMED AGENT MUST SI	GN	Date	-	
11. This corporation owes or ha Intangible Personal Propert	as paid the curren	No (See other side for information on intangible tax.)			
this reinstatement application, the reason for disso owed by the corporation have been paid and the r on this application is true and accurate, and my sig	olution has been eliminated, the names of individuals listed on t	corporate name satisfies his form do not qualify for	provided for in chapter 607 or 617, F.S. I further certify that when filing is the requirements of section 607.0401 or 617.0401, F.S., that all fees an exemption under section 119.07(3)(i), F.S. The information indicater 0		
SIGNATURE: \(\square \)	WM Mills		305-662-414	4	
SIGNATURE AND TYPED OR PRI	N LED NAME OF SIGNING OFFICE	ER OR DIRECTOR	Date Dayilme Phone #		
		* * * * * * * * * * * * * * * * * * *		·· • • • •	

The Florida Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Sirs,

Enclosed is our completed reinstatement form for the Florida corporation named Miami Sports Magazine, Inc. Since we moved our corporate offices, we did not receive the annual report packet. Only by calling your offices recently did we discover that this information was past due.

Please find enclosed the completed application for reinstatement and our payment of \$150.00 as per the instructions given by a member of your staff.

We greatly appreciate your patience in this matter, and now that we know when this information is due, we should have it for you it the future on time.

Sincerely,

Andrew M. Miller

President

Miami Sports Magazine, Inc.

6600 S.W. 116th Street

Pinecrest, Florida

33156