PLEASE BEAD	ALL INSTRUCTIONS	BEFORE C		HIS FORM	· · · · · · · · · · · · · · · · · · ·	
REINSTAVEMENT	FLORIDA DEPARTME Sandra B. Mo Secretary of AID DIVISION OF CORPC	NT OF STATE rtham State		<b>HILED</b>	0	
			98 NOV 16 PH 3: 40			
DOCUMENT # P990000057505 1. Corporation Name P. 97000057305 MHC & MHC ENTERSILISES, THL.			SECRETAR OF STATE TALLAHASSEE, FLORIDA			
f						
Principal Place of Business Mailing Address 1100 LDEST ADENUE STE 816						
Miami, Beach, FL 33/39			8000026945883 -11/23/3801146013 *****150.00 *****150.00			
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable						
Suite, Apt #, etc.			4. Date Incorporated or Qualified To Do Business in Florida 06 30 97			
City & State	City & State		5. FEI Number / 65-078	5097 -	Applied For Not Applicable	
Zip Country	Zip	Country		S8.75 Additi	onal Fee required	
7. Names and Street Addresses of Each Officer and/	/ or Director' (Florida nonprofit corpor	ations must list at lea				
Title(s) Name of Officers and/or Directors	( 0	reet Address of Each fficer and/or Director Jse Post Office Box N	City / State / Zip			
2 altap	Zan Michael Prode in San San San San San San San San San Sa					
TRES MICHAEL CEPEDA 1100 WEST AVENUE STE SIG Miami, Beach, FL 33/39 Steer EVELIN Julia 1100 WEST ASENNE STE SIG WIGHT; Beach FL 33/39						
Jack EVElyn Julia 1100 West ASTONIA STERL WIAMI, Beach FL 33/3					FL 33/39	
			1 918			
	7					
	**					
8. Name and Address of Current I	Name	9. Name and Address of New Registered Agent				
MICHAEL CEPEda			reet Address (P.O. Box Number is Not Acceptable)			
1100 WEST AJENUE	Suite, Apt. #, Etc.					
afiomi, Beach FL	City					
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						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No 🖾 (See other side for information on intangible tax.)						
12. I certify that I am an officer or director or the receivent this reinstatement application, the reason for disso owed by the corporation have been paid and the n on this application is true and accurate, and my sig	lution has been eliminated, the corp names of individuals listed on this for	orate name satisfies t m do not qualify for a	the requirements of section an exemption under section	607.0401 or 617.0401, F.S.,	that all fees	
SIGNATURE: MICHAEL CEPEda Pries Michael H. Cipida 11/6/98 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Data Data Daytime Phone #						

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MAC & MAC ENTERPRISES, INC 1100 WEST AVENUE **SUITE 816** MIAMI BEACH, FLORIDA 33139 305-672-1542

November 10, 1998

State of Florida **Division of Corporation** P.O. Box 6327 Tallahassee, FL 32314

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Re: Mac & Mac Enterprises, Inc. FEI Number: 65-0785097:

Dear Sirs:

Enclosed please find a renewal form and a check in the amount of \$150.00 for the renewal of Mac & Mac Enterprises, Inc.

I never received a renewal form in the mail due to my place of residence changing twice in the last year. My accountant, Reynolds Duclas has advised me that he has spoken to your office, and was advised that my corporation will be renewed for a fee of \$150.00, to which I am most gracious. Please excuse this delay, and accept my apologies for any inconvenience.

Thank you for your attention to this matter.

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Sincerely, Michael A. Cepela Michael A. Cepeda

MAC:ej cc: Reynolds Duclas