

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2006 SEP 27 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000057960

1. Corporation Name

MIGUEL INSTALLATION, INC.

2. Principal Office Address

9831 N.W. 129 TERRACE

3. Mailing Office Address

9831 N.W. 129 TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIALEAH GARDENS FL

City & State

HIALEAH GARDENS FL

Zip
33018

Country
USA

Zip
33018

Country
USA

REINSTATEMENT
CR2E081 (12/05)

05-06

4. Date Incorporated or Qualified
To Do Business in Florida

06/30/1997

5. FEI Number

65-0766707

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MIGUEL FERREIRO

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

9831 N.W. 129 TERRACE

Suite, Apt. #, Etc.

City

HIALEAH GARDENS

State
FL

Zip Code

33018

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Miguel Ferreiro

REGISTERED AGENT MUST SIGN

Date 09-26-06

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 |
|--------|--------------------------------------|---|--------------------------|
| PD | MIGUEL FERREIRO | 9831 N.W. 129 TERRACE | HIALEAH GARDENS FL 33018 |
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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 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 contained in Chapter 119, 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

09-26-06

Date

Daytime Phone #

9/27/06

212

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

PLEASE BE ADVISED THAT I NEVER RECEIVED THE ANNUAL REPORT NOTICE FROM YOUR OFFICE TO PAY THE ANNUAL FEES FOR THE YEAR OF 2005 & 2006. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS COMPANY IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR TIME AND CONSIDERATION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY YOURS,



MIGUEL FERREIRO
PRESIDENT