

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JAN 11 AM 11:37

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000041002

1. Corporation Name

Mico Worldwide Trading Inc.

2. Principal Office Address - No P.O. Box #

1233 SE 11 Avenue

Suite, Apt. #, etc.

City & State

Deerfield Beach, Florida

Zip

33441

Country

USA

3. Mailing Office Address

1233 SE 11 Avenue

Suite, Apt. #, etc.

City & State

Deerfield Beach, Florida

Zip

33441

Country

USA

CR2E081 (12/07)

4. Date Incorporated or Qualified
To Do Business in Florida

1998

5. FEI Number

65-0832617

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

Jean Michel Lopez

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

1233 SE 11 Avenue

Suite, Apt. #, Etc.

City

Deerfield Beach

State

FL

Zip Code

33441

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Jean Michel Lopez

Date 1-8-08

REGISTERED AGENT MUST SIGN

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
P,VP,T	Jean-Michel Lopez	1233 SE 11 Avenue	Deerfield Beach, FL, 33441

REINSTATEMENT

06-07

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:

Jean Michel Lopez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-08

Date

954-931-2993

Daytime Phone #