

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 15 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000100661

1. Corporation Name

MILLENNIUM FITNESS CENTER, INC.

Principal Place of Business

8758 SW 72 STREET
MIAMI FL 33173
US

Mailing Address

9001 S.W. 77 AVENUE
MIAMI FL 33156

If above addresses are incorrect in any way, line through incorrect information and enter correction below.



REINSTATEMENT

03

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/03/1998

5. FEI Number

65-0893595

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PS	VILLA, ANGEL I	9001 S.W. 77TH AVE	MIAMI FL 33156
		8601 S.W. 68 ST	Miami, FL 33143

800023829378
10/15/03--01075--007 **150.00

8. Name and Address of Current Registered Agent

VILLA, ANGEL I
9001 S.W. 77TH AVENUE
MIAMI FL 33156

9. Name and Address of New Registered Agent

Name

Villa, ANGEL

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

8601 S.W. 68 ST.

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33143

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. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

OCT. 14, 03

11. 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 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:

[Signature] ANGEL I. Villa

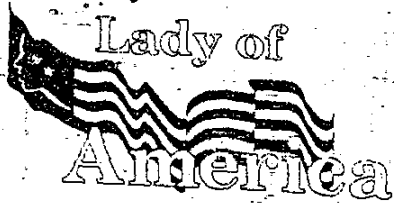
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/14/03 305 2709995

Daytime Phone #

CR2040 (7/03)



The World's Leading Fitness Center Franchise

OCT. 14, 03
Florida Department of State
Division of Corporations
Glenda E. Hood

DEAR, Glenda E. Hood

This letter is in reply to your dissolution or
Revocation of our Corporation. I Angel Villa as officer &
Agent send our apologies for not filing, but our Corporation
has until present received any notification of document to
file. I file EVERY year timely this would be our fifth year.
The Corporation's mailing address has changed I gave notice
to the state and filed an address forwarding to the Post office.
Please, consider our explanation which is the truth as Agent;
Representing Millennium Fitness Center, Inc. Inclosed find our
Application for Reinstatement plus fee for 2003.

Sincerely,

President, CEO