

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 OCT 16 AM 10:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000032145

1. Corporation Name

THE MILLENNIUM RESERVE, INC.

2. Principal Office Address

9425

3. Mailing Office Address

9425

FOUNTAINBLEAU BLVD FOUNTAINBLEAU BLVD

Suite, Apt. #, etc.

#205

Suite, Apt. #, etc.

#205

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33172

Country

USA

Zip

33172

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

4-8-99

5. FBI Number

65-0909108

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$275 Additional Fee required  
for a Certificate of Status

400008372584--2

-10/15/02--01032--009

\*\*\*\*450.00 \*\*\*\*450.00

7. Name and Address of Current Registered Agent

Name

LEONARD C. RINALDO

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

9425 FOUNTAINBLEAU BLVD.

Suite, Apt. #, Etc.

#205

City

MIAMI

State

FL

Zip Code

33172

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0608 or 617.0603, F.S.

Signature of

Registered Agent

REGISTERED AGENT MUST SIGN

Date

10-11-02

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P-90	LEONARD C. RINALDO	9425 FOUNTAINBLEAU BLVD #205	MIAMI, FL 33172

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEONARD C. RINALDO

Date

Filed 10-11-02 303 485-8361

Daytime Phone #

292

October 11, 2002

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

Re: The Millennium Reserve, Inc. - Reinstatement

Gentlemen:

Enclosed is our application for reinstatement together with 3 years filing fees. We request that you waive the reinstatement fee. We put in a change of address with the post office, but never received the 2000 or subsequent annual forms. (Your records should show that the forms were returned to you.) In checking on line for someone else's corporate status, I was reminded of our own and when I checked I found that we were listed as inactive. Finding nothing in our files for having done the annual filing, we immediately contacted you for reinstatement.

Thank you,

The Millennium Reserve, Inc.

Leonard C. Rinaldo

Encls.

10-11-02