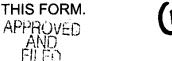
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE Katherine Harris



APPLICATION

Secretary of States **DIVISION OF CORPORATIONS**

P99000088529 **DOCUMENT#**

1. Corporation Name

M.I.S. CONSULTING CORP.

Principal Place of Business Mailing Address

4045 NW 6TH STREET DEERFIELD BEACH FL 33442 4045 NW 6TH STREET DEERFIELD BEACH FL 33442

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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|--|-----------------------------------|--|--|---|-----------------|---|---|--------------------------|------------------|---------------------------------------|--|
| If above addresses are incorrect in any way, line through incorrect in 2. New Principal Office Address, If Applicable 3. New Maili | | | | n incorrect information and enter correction below. New Mailing Office Address, If Applicable Suite, Apt. #, etc. | | | 4. Date Incorporated or Qualified To Do Business in Florida 10/06/1999 5. FEI Number Applied For | | | | |
| Suite, Apt. #, etc. Suite | | | | | | | | | | | |
| City & State | е | | City & State | | | | 6. Applied For Not Applied For | | | Not Applicable | |
| Zip Country | | Zip Country | | Country | | CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee re for a Certificate of St | | | | | |
| 7. Names | and Street Ad | dresses of Each Officer and | d/or Director (Flo | rida nonprofit | corporations mu | ıst list at le | ast 3 directors) | | | | |
| Title(s) | Name of Officers and/or Directors | | | Street Address of Each Officer and/or Director | | | | Ci 4 | ty / State / Zip | · · · · · · · · · · · · · · · · · · · | |
| D | MARUCA, THERESA | | | 4045 NW 6TH STREET | | | DEERFIELD BEACH FL 33442 | | | | |
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| | | | The state of the s | | | 4 | +000035010848 | | | | |
| = | | 11241071 | | | | | | | | | |
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| | | | | | | | | | | | |
| 8. Name and Address of Current Registered Agent | | | | | | | Name and Address of New Registered Agen | | | | |
| CORPORATE CREATIONS ENTERPRISES, INC. Randy Ferrande 941 FOURTH STREET #200 MIAMI BEACH FL 33139 305 672 0686 | | | | | | 1 | (P.O. Box Number | r is Not Acceptable) | M | | |
| 941 F MIAM | OURTH STE I BEACH FL | REET #200 .33139 スパ | Suite, Apt. #, Etc | | | c. | | 1 | | | |
| | | | | • | City | : | | | State Zip (| Code | |
| 10. I, being Signature o Registered | of | e registered agent of the al | 1. J. | | Comp | | obligations of Sec | tion 607.0505, F.S. | - | | |
| - | | F | REGISTERED AG | SENT MUST S | SIGN | | | | | | |
| this rain | estatement an | officer or director or the rec plication, the reason for dis tion have been paid and the | solution has been | n eliminated, ti | he corporate na | me satisfie | s the requirement | s of section 607.0401 or | 617.0401, F.: | S., that all fees | |

10/25/00

Jos Dept of State From: MIS Consulting Corp Hours w & street 33492 Deerfield But July 33492

I never received prior notice to pay the 150 fee for my company until I received a notice of administrative received a notice of administrative dissolution or revocation.

I called your dept and they Said gust to mail \$150.00

Markyar Sheusa Mawr, Ares. 1954 224 2024