

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR



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

FILED

02 DEC 31 PM 12:13

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **N01000000671**

1. Corporation Name

BOSNIAN MUSLIM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

118 MAIN AVENUE N.
 CLEARWATER FL 33765

118 MAIN AVENUE N.
 CLEARWATER FL 33765



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

9/9/02 90021 041 11/4/25

4. Date Incorporated or Qualified To Do Business in Florida

01/30/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3694807

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P (D)	HERCINOVIC, DAMIR <i>SIGNING OFFICER AND DIRECTOR</i>	1857 ELMHURST DRIVE	CLEARWATER FL 33765
VP D	SAKOVIC, YEDAD	1508 STURBRIDGE COURT	DUNEDIN FL 34698
T	MAJDANKIC, SENAD	1217 FRUITLAND AVENUE	CLEARWATER FL 33764

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ACCOUNTING & TAX HELP, INC.
 8668 PARK BLVD.
 SUITE A
 SEMINOLE FL 33777

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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 REQUIRED

Date

REGISTERED AGENT MUST SIGN

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:

Jim Smith
 DROZENJE BOSANSKIH MUSLIMANA
 BOSNIAN MUSLIM ASSOCIATION, INC.
 118 Main Ave., North
 Clearwater, FL 33765

10/22/2002 (727) 725-0667
 Date Daytime Phone #

CFR2E040 (8/02)

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October 23, 2002

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Bosnian Muslim Association, Inc.
118 Main Avenue N.
Clearwater, FL 33765-3222
(727) 466-6215
EIN: 59-3694807

**RE: NOTICE OF ADMINISTRATIVE DISSOLUTION
DOCUMENT # NO000000671**

Dear Sir/Madam:

As we have been advised in a telephone conversation on October 22, 2002, we are sending back to you DOCUMENT #: NO1000000671 with EIN provided in section 5.

The EIN was sent to you together with your request of September 12, 2002, and since you did not receive it, apparently it has been lost in the mail.

Also, per your suggestion, we put letter "D" in front of the president's name, who is at the same time our director and signing officer.

We hope that this letter will be sufficient to clarify any misunderstanding and to keep our corporation active.

Respectfully,

Dr. Damir Hercinovic, President



~~UDRUŽENJE BOSANSKIH MUSLIMANA~~
~~BOSNIAN MUSLIM ASSOCIATION, INC.~~
118 Main Ave., North
Clearwater, FL 33765