

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *PAGE 10/22*

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

DOCUMENT # P99000084213

00 NOV 22 PM 12:10

1. Corporation Name

ADVANCE AUTO BROKERS, INC.

Principal Place of Business

Mailing Address

8025 N. ANDERSON RD., LOT A
 TAMPA FL 33634

8025 N. ANDERSON RD., LOT A
 TAMPA FL 33634



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		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		09/20/1999	
City & State		City & State		5. FEI Number	
Zip		Country		593598087	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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	ABDELREHIM, YASSER	8025 N. ANDERSON RD., LOT A	TAMPA FL 33634

000003491400--2
 -12/08/00-01024-015
 ****150.00 ****150.00

12/15

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ABDELREHIM, YASSER
 8025 N. ANDERSON RD., LOT A
 TAMPA FL 33634

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State Zip Code
	FL

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.

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/24/00 (813) 901-5400
 Date Daytime Phone #

CR2E040 (800)

Page 2 of 2

From : Advance Auto Brokers, Inc.

To : Department of State
Division of Corporation

Re : 2000 Business Report

Due to a serious and deadly illness in the family, I had to leave the country for several months to stay next to my dying father. In my absence I hired a relative to manage the business and pay the bills.

My manager and I are not familiar with the annual report in this form of bill, and are not sure if we ever received the previous notices of 2000 Uniform Business Report. Being ignorant with this type of bill that we encounter for the first time, I would ask you to please waive the additional penalties imposed and accept the enclosed check for \$150 representing the annual fee for the Uniform Business report.

Thank you for understanding and cooperation in resolving this matter. Should you have additional information, please do not hesitate to write or call.

Sincerely;

Yasser Abdelrehim
President.

Yasser Abdelrehim

Yasser Abdelrehim

Yasser Abdelrehim