

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra S. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 682147

1. Corporation Name

U.S. Security Services Corporation

Principal Place of Business

1950 PT ST Lucie Blvd.
 Pt. St. Lucie, FL 34983

Mailing Address

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

2. New Principal Office Address, If Applicable

9835 S.W. 72 Street
 Suite 202

City & State
 Miami, FL

Zip
 33172

Country
 USA

3. New Mailing Office Address, If Applicable

9835 S.W. 72 Street
 Suite 202

City & State
 Miami, FL

Zip
 33172

Country
 USA

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FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS

REINSTATEMENT 96-990

4. Date Incorporated or Qualified To Do Business in Florida

8/7/80

5. FBI Number

59-2503359

Applied For

Not Applied For

6. CERTIFICATE OF STATUS DESIRED ☐

See To: Add for each fee required by the 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	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P	Bey Sedaghat	9835 S.W. 72 Street #202	Miami, FL 33172

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 -08/25/99--01073--023
 ***1200.00 ***1200.00

8. Name and Address of Current Registered Agent

Behzad Sedaghat
 1959 Pt. St. Lucie Blvd. #205
 Pt. St. Lucie, FL 34983

9. Name and Address of New Registered Agent

Name
 Bey Sedaghat
 Street Address (P.O. Box Number is Not Acceptable)
 9835 S.W. 72 Street
 Suite, Apt. #, Etc.
 Suite 202
 City
 Miami
 State
 FL
 Zip Code
 33172

*10. I, being authorized the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0805, F.S.

Signature of Registered Agent Bey Sedaghat
 REGISTERED AGENT MUST SIGN

Date

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information on intangible tax.)

12. 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 corporation's 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)(f), 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:

Bey Sedaghat
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 15, 99
 Date Daytime Phone #

KE