

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

10 JAN 21 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 738549

1. Corporation Name

HAIFA CONDOMINIUM ASSOCIATION, INC.

REINSTATEMENT 07-10

400166855014
01/21/10--01043--016 **245.00
CR2E081 (11/09)

2. Principal Office Address - No P.O. Box #
1735 N.E. 164 Street

Suite, Apt. #, etc.

3. Mailing Office Address
1735 N.E. 164 Street

Suite, Apt. #, etc.

City & State

North Miami Beach, Florida

City & State

North Miami Beach, Florida

Zip

33162

Country

Dade

Zip

33162

Country

Dade

4. Date Incorporated or Qualified
To Do Business in Florida **1970**

5. FEI Number
59-1427355

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Mujahiddin Shaikh

Street Address (P.O. Box Number is Not Acceptable)
21204 Harbor Way

Suite, Apt. #, Etc.

Unit # 125-12

City
Miami

State
FL

Zip Code
33180

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **January 14, 2010**

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Mujahiddin Shaikh	21204 Harbor Way #125-12	Miami, FL-33180
VP	Rosales, Juan	1735 N.E. 164 Street Apt.#205	North Miami Beach, FL-33162
T	Rosales, Juan	1735 N.E. 164 Street Apt 205	North Miami Beach, FL-33162
S	Syed Badruzzaman	1735 N.E. 164 Street Apt 201	North Miami Beach, FL-33162
D	Rubinel Romero	1735 N.E. 164 Street Apt.311	North Miami Beach, FL-33162
D	Gina Requena	1735 N.E. 164 Street Apt 101	North Miami Beach, FL-33162

10. E-mail Address: **shaikhmujahiddin@yahoo.com**

(To be used for future annual report notification)

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. I further certify 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:

Mujahiddin Shaikh

January 14, 2010 786-537-9086

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SC 1/22