

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # H 55746

1. Corporation Name

S & B International Investments, Inc.

Principal Place of Business

Mailing Address

7646 W Irlo Bronson Mem Hwy  
Kissimmee, FL 34746

200 E Robinson St  
Orlando, FL 32801

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

32751

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5/7/85

5. FEI Number

59-2721006

Applied For

Not Applicable

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)

Title(s)

Name of Officers  
and/or Directors

Street Address of Each  
Officer and/or Director

City / State / Zip

1 (Do NOT Use Post Office Box Numbers)

P/S/D

Yousaf Sheik

7646 W Irlo Bronson Mem Hwy

Kissimmee, FL 34746

*Signature*

700002487917--6  
-04/14/98-01046-011  
\*\*\*900.00 \*\*\*900.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Bernard O'Neill, Jr.  
Suite 865  
200 E. Robinson Street  
Orlando, Florida 32801

Name

Randall C. Smith, Esq.

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

750 N. Maitland Avenue

Suite, Apt. #, Etc.

City

Maitland

State

Zip Code

FL

32751

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

REGISTERED AGENT MUST SIGN

Date

4-4-98

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 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YOUSAF SHEIK, PRES

Date

Daytime Phone #

4/5/98

(407) 876-1783

REINSTATEMENT 97-98

FILED

98 APR -9 PM 12:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2040 (1/98)