

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

FILED

97 MAR 24 AM 10:58

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **K97772**

1. Corporation Name
Intelligent Systems Design, Inc.

Principal Place of Business

**14540 SW 136th Street
MIAMI, FL 33186
SUITE 202**

Mailing Address

**P.O. Box 161739
MIAMI, FL 33116**

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

REINSTATEMENT

91-97 AD

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1989

5. FEI Number

65-0125717

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)

1 Title(s)	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
PRES.	NAVEED MOHAMMAD	8301 SW 144th Street MIAMI, FL 33158	

800002121228--9

8. Name and Address of Current Registered Agent

**Naveed Mohammad
8933 S.W. 123rd Court, #106
Miami, FL 33186**

9. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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]

REGISTERED AGENT MUST SIGN

Date **3/3/97**

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: **NAVEED MOHAMMAD**

[Signature]

2/20/97 305-234-0777

CR2E040 (12/95)



ACCOUNT NO. : 072100000032

REFERENCE : 277778 7124776

AUTHORIZATION :

Patricia Puyet

COST LIMIT : \$ 1636.25

ORDER DATE : February 28, 1997

ORDER TIME : 8:57 AM

ORDER NO. : 277778-005

CUSTOMER NO: 7124776

CUSTOMER: Ms. Ivonne O'donnell
Intelligent Systems Design,
7266 Sw 48 Street

Miami, FL 33155

DOMESTIC FILINGS

NAME: INTELLIGENT SYSTEMS DESIGN,
INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith
EXAMINER'S INITIALS _____

RECEIVED
97 MAR 24 AM 9:52
TELETYPE UNIT