

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L11839**

1. Corporation Name

INDUS TRADING INC.

Principal Place of Business

**6460 HOLLYWOOD BLVD.
PEMBROKE PINES FL 33024**

Mailing Address

~~**6510 SHERMAN STREET
HOLLYWOOD FL 33024**~~

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/24/1989

5. FEI Number

65-0145691

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)

1

Name of Officers
and/or Directors

2

Street Address of Each
Officer and/or Director

3

City / State / Zip

4

P

ULLAH, INAYAT

~~**6510 SHERMAN STREET
1994 N.W. 179 AVE**~~

~~**HOLLYWOOD FL 33024
PEMBROKE PINES FL 33029**~~

**600024250926
10/29/03--01041--015 **150.00**

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ULLAH, INAYAT

~~**6510 SHERMAN STREET
HOLLYWOOD FL 33024**~~ **1994 N.W. 179 AVE
PEMBROKE PINES FL 33029**

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10-27-03

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

10-27-03

Date

Daytime Phone #

(954) 962-9918

CR2E040 (7/03)

INDUS
TRADING, INC.

6460 Hollywood Blvd.
Pembroke Pines, FL 33024

Tel: (305) 962-9918
Fax: (305) 962-9918

Florida Department of State
Division of Corporations
Annual Report/Restatement
P.O. Box 6327
Tallahassee FL 32314-6327

Corporation did not receive 2003 report
notice have come in the mail
Enclosed in the check for \$ 150.00

10-27-03

Document # L11839

Maya Kell
President and Registered Agent