

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE
Sandra L. Hamm
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 NOV -7 PM 12:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L14431

1. Corporation Name
RIZQ, INC.

Principal Place of Business
12257 SOUTH DIXIE HWY ✓
~~14605 SOUTH DIXIE HIGHWAY~~
MIAMI FL 33156 ✓
US

Mailing Address
12257 SOUTH DIXIE HWY ✓
~~14605 SOUTH DIXIE HIGHWAY~~
MIAMI FL 33156 ✓
US

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

09/05/1989

5. FEI Number

65-0147690

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 |
|---------------|---|--|-------------------------|
| D | BHIMLA, AHMED | 13205 SW 87TH TER | MIAMI FL |
| D | KHAN, PERVEZ | 13222 SW 52ND TER | MIAMI FL |
| | | | |
| | | | |
| | | | |
| | | | |

500002344965--0
-11/12/97--01088--023
****165.00 ****165.00

8. Name and Address of Current Registered Agent

AVCHEN, BARNEY B.
226 PALM SPRINGS CENTER
1840 W 49TH ST
HIALEAH FL 33012

9. Name and Address of New Registered Agent

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.

Signature of
Registered Agent

Sandra L. Hamm

REGISTERED AGENT MUST SIGN

Date 11-4-97

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:

Sandra L. Hamm

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ahmed Bhimla

11-4-97 (305) 238-9663

Date

Daytime Phone #