PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 FEB 18 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N25813

1. Corporation Name

Hindu Religious Center, Inc.

700012696727
02/18/03--01040--008 **358.75
REINSTATEMENT 01-03

2. Principal Office Address		**3.** Mailing Office Address	
3105 West Waters Avenue		3105 West Waters Avenue	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 315		Suite 315	
City & State		City & State	
Tampa, FL		Tampa, FL	
Zip	Country	Zip	Country
33614	USA	33614	USA

4. Date Incorporated or Qualified To Do Business in Florida: 04/07/88

5. FEI Number: 59-2898769 ☐ 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: Sandip I. Patel, Esquire

Street Address (P.O. Box Number is Not Acceptable): 3105 West Waters Avenue

Suite, Apt. #, Etc.: Suite 315

City: Tampa | State: FL | Zip Code: 33614

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: Sdp I Patel — Date: 02/17/03
REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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
D	Ramesh Shah	3119 Mossvale Lane	Tampa, FL 33618
PD	Kiran Patel	11609 Carrollwood Drive	Tampa, FL 33618
TD	Nikunj Patel	13706 Sun Court	Tampa, FL 33624
SD	Harish Patel	7901 Batou Club Boulevard	Largo, FL 33777

10. 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: _____ 02/17/03 (813) 931-9924
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2/19