


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 JUL 13 AM 10:39

DOCUMENT # N96000005332

1. Corporation Name  
Islamic Society of Orlando, Inc.

1586 N. Goldenrod Road  
P. O. Box 338

2. Principal Office Address  
1586 N. Goldenrod Road

3. Mailing Office Address  
P. O. Box 338

Suite, Apt. #, etc.  
Suite A

Suite, Apt. #, etc.

City & State  
Orlando, FL

City & State  
Goldenrod, FL

Zip Country  
32807 U.S.A.

Zip Country  
32733 U.S.A.

200039124982  
07/14/04--01043--013 \*\*428.75

REINSTATEMENT 01-04

4. Date Incorporated or Qualified  
To Do Business in Florida 10/17/1996

5. FEI Number 59-3406381  
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  
Muhammad Musri

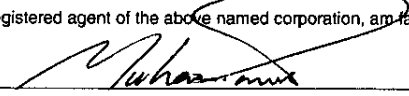
Street Address (P.O. Box Number is Not Acceptable)  
1586 N. Goldenrod Road

Suite, Apt. #, Etc.  
Suite A

City  
Orlando

State Zip Code  
FL 32807

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 

Date July 8, 2004

REGISTERED AGENT MUST SIGN

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/P	Muhammad Musri	1586 N. Goldenrod Road	Orlando, FL 32807
D/S	Amir Elmasri	4037 Metric Drive, Suite 140	Winter Park, FL 32792
D/T	Samer Charani	4037 Metric Drive, Suite 140	Winter Park, FL 32792

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:  Muhammad Musri July 8, 2004 (407) 273-8363  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFR2E081 (01/04)