

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 DEC 15 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000006156

1. Corporation Name

CENTRAL ISLAMIC ORGANIZATION OF
GUYANA-USA, INC.

REINSTATEMENT 02-03

700025482727
12/15/03--01011--005 **306.25

2. Principal Office Address

1322 N PINE HILLS ROAD

Suite, Apt. #, etc.

City & State

ORLANDO FL

Zip

32808

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/27/1998

5. FEI Number

59-3540242

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

AKBAR ALLAN ALI

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

1322 N PINE HILLS ROAD

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32808

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

Akbar Allan Ali
REGISTERED AGENT MUST SIGN

Date

12/5/03

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
P	NAEEM NASIR	9320 LAKE FISCHER BLVD	GOTHA FL 34734
T	AKBAR ALLAN ALI	1322 N PINE HILLS ROAD	ORLANDO FL 32808
V	SULTAN H RAHMAN	1041 KERSFIELD CIRCLE,	HEATHROW FL 32746
S	ABDOOL BACCHUS	7101 ROTCHILD COURT	ORLANDO FL 32835

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:

Akbar Allan Ali
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/5/03

407-298-3900

Daytime Phone #

CR2E081 (10/02)

TR