

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000007106

1. Corporation Name

SALEH INC

3185 Northwest 207 Street
3185 Northwest 207 Street

2. Principal Office Address

3185 Northwest 207 Street

Suite, Apt. #, etc.

3. Mailing Office Address

3185 Northwest 207 Street

Suite, Apt. #, etc.

City & State

Miami Florida

City & State

Miami Florida

Zip

33056

Country

Dade

Zip

33056

Country

Dade

4. Date Incorporated or Qualified
To Do Business in Florida 01/13/2000

5. FEI Number
65-0981481

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

Saleh Saleh

Street Address (P.O. Box Number is Not Acceptable)
3185 Northwest 207 Street

Suite, Apt. #, Etc.

City

Miami

State
FL

Zip Code
33056

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

REGISTERED AGENT MUST SIGN

Date 10/04/2004

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
Preside	Saleh Saleh	3185 Northwest 207 Street	Miami FI 33056

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/04/2004

Date

(305) 622-9670

Daytime Phone #

FILED

04 OCT 18 PM 4: 23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

CR2E081 (01/04)



SALEH INC
207 QUICK STOP
3185 N.W 207TH STREET
MIAMI, FL 33056
(305) 622-9670

To who may concern : Florida Department Of State

~This letter is hereby send to the Florida Department of State to notify that we never receive the 2003 Annual Report neither the first or second notice to reinstate the corporation , base on our conversation with one of the operator of the Florida Department of State she explain us to send a check for the amount of \$300.00 for the renew or reinstate of the corporation and a letter explain what happen.

~If there is any question do not hesitate to contact Saleh Saleh at (786) 443-5626