

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAY 15 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000009274

1. Corporation Name

KASCO TRADING CORP

2. Principal Office Address

224 NW 37th St
MIAMI, FLORIDA 33127

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

Zip

33127

Country

USA

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

2000

5. FEI Number

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

EZRA ERIC KASSIN

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

7980 HAWTHORNE AVE

Suite, Apt. #, Etc.

MIAMI BEACH, FLORIDA

City

State
FL

Zip Code

33141

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

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
Pres.	MAURICE V. KASSIN	7980 HAWTHORNE AVE	MIAMI BEACH, FL.

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

MAURICE V. KASSIN

4/9/2003

Date

305-573-3114
305-205-7585

Daytime Phone #

CR2E081 (10/02)

Kasco Trading Corp.

224 N.W. 27th Street

Miami, Florida 33127

(305) 573-3114 FAX (305) 573-3123

1-866-44-KASCO

kascotrading@aol.com

May 13, 2003

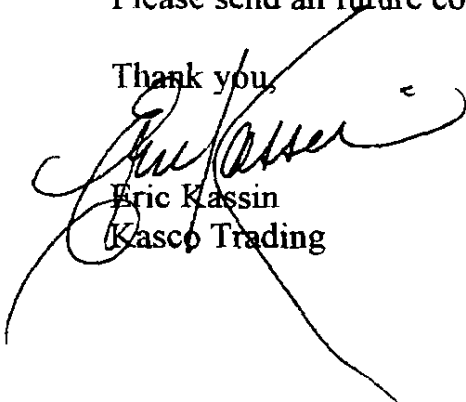
Dear Justin,

I hope this letter finds you well.

I did not receive the statement for payment of the corporate reinstatement fees for 2002-2003.

Please send all future correspondence to the above address.

Thank you,



Eric Kassin
Kasco Trading