

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P00000041424**

1. Corporation Name  
**ALEXIS JEWELERS INC.**

Principal Place of Business <b>490 MANDALAY CLEARWATER FL 33767</b>	Mailing Address <b>490 MANDALAY CLEARWATER FL 33767</b>
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida <b>04/21/2000</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number <b>59-3646897</b>	
City & State		City & State		Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	



FILED  
03 JAN -6 PM 2:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	WASIF, EHAB	490 MANDALAY	CLEARWATER FL 33767
V	HARIDI, NABIL	490 MANDALAY	CLEARWATER FL 33767

100009873791  
01/06/03--01070--005 \*\*150.00

8. Name and Address of Current Registered Agent

WASIF, EHAB  
3313 HAVILAND, #104  
PALM HARBOR FL 34684

9. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State Zip Code <b>FL</b>

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

*WASIF* SIGNATURE REQUIRED

Date **1-3-03**

REGISTERED AGENT MUST SIGN

11. 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:

*WASIF* SIGNATURE REQUIRED

**1-3-03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/02)

ALEXIS JEWELERS INC.  
490 MANDALAY AVE, STE 11  
CLEARWATER, FL 33767-2017  
727-449-9910

January 2, 2003

Florida Department of State  
Division of Corporations  
Tallahassee, FL 32314

Gentlemen:

We are submitting Application for Reinstatement with our check for \$ 150.00.

We have never received any prior uniform business report (UBR). We are located on the Clearwater Beach. Our street has been torn up with continuous construction since 2001.

Deliveries of merchandise and mail have been disrupted and fraught with delay and non delivery.

I am a small business person who is struggling to stay in business. I recently hired a CPA to untangle my financial affairs. He suggested that I write your office and relate the horrendous circumstances that we merchants are enduring during this never ending construction of our street and the infamous roundabout at the beginning of the street.

Merchandise and mail have been disrupted to the point that I am never sure of delivery. I personally take all my mail to the post office to ensure that it gets mailed...

I respectfully request that your office not impose any penalty. I have no knowledge of ever receiving the (UBR) forms.

Thank you for kind consideration of accepting my application for reinstatement.

Sincerely,



Ehab Wasif,  
President