

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

CORPORATION



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

02 JUL 10 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800006358988--3
-09/20/02--01077--015
****150.00 ****150.00

800006358988--3
-07/12/02--01056--022
****150.00 ****150.00

DOCUMENT #

1. Corporation Name

H. Flex Industrial Corp.

2. Principal Office Address

950 South Ocean Drive

3. Mailing Office Address

Same

Suite, Apt. #, etc.

7F

Suite, Apt. #, etc.

Same

City & State

Hallandale, Florida

City & State

Same

Zip

33009

Country

USA

Zip

Same

Country

Same

4. Date Incorporated or Qualified
To Do Business in Florida

6/01/00

5. FEI Number

65-1012543

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name
Antonio Mahfuz

Street Address (P.O. Box Number is Not Acceptable)
950 South Ocean Drive

Suite, Apt. #, Etc.

7F

City

Hallandale

State
FL

Zip Code

33009

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 May 29 / 2002

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	Antonio Mahfuz	950 South Ocean Drive, 7F	Hallandale, FL 33009

01-02 UBR

TO

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:

Antonio Mahfuz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 29 / 2002

Date

Daytime Phone #

Page 2 of 2

Astencio Accounting Services, Inc.
18800 NW 77th Court
Miami, FL 33015
Phone: (305) 804-2308
Fax: (305) 829-2493

June 5, 2002

Florida Department of State
Corporation Reinstatement

Re: H. Flex Industrial Corp.
FIN: 65-1012543

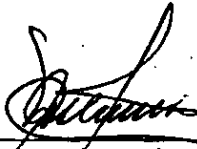
To Whom It May Concern:

Recently our client was notified about the dissolution of his corporation due to the failure to file the Annual Report. Please note that H. Flex Industrial Corporation never received the report in question and was probably because of a change of address.

Enclosed please find the completed Corporation Reinstatement form along with a check for \$ 150.00. Please abate all extra charges and advise.

Sincerely,

Per conversation didn't receive 2001
notice


Mylene Astencio
Accountant