DIEVOE BEVILVALI IN	STRUCTIONS REPORE	COMPLETING	HIS CONIVI.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCL	MEN.	T #	P00000045047
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1. Corporation Name

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F & M OF MIAMI B., INC.				3000	1076	OF STATE E. FLORIDA)——[⁻]
2. Principal Office Address 8132 Harding Avenue	3. Mailing Office Address 8132 HARDING	Ave.		11-	-03/11/C ****150	01044-	-013 ? 50,00
Suite, Apt. #, etc. #7	Suite, Apt. #, etc. #7		4. Date inco	rporated or siness in Fk		05/05/0	0
Chy&State Miami Beach FL	City & State Miami Beach	FL	5. FEI Numb	per		Ap	plied For
Zp Country 33141 Miami Dade	} ·	Country Miami Dade	G. CERTIFICAT	TE OF STATU	S DESIRED 🔲	\$8.75 Additional for a Curifical	See reuner
	7. Name and Add	dress of Current Reg	istered Agent				
Julio C. So Street Address (P.O. Box Number 100 Kings P	is Not Acceptable)						
" #1506 City Sunny Isles	Beach			State FL	Zip Code 33160		
8. I, being appointed the registered agent of the Signature of Registered Agent	above named corporation, am fan		the obligations of sec	tion 607.050	7/24	1, F.S. 102	
9. Names and Street Addresses of Each Office	r and/or Director (Florida nonprofit	corporations must list	at least 3 directors)				
Titles Name of Officers and/or Direct	rtors	Street Address of Officer and/or Dir			City	/ State / Zip	
P Anastacio M. Simosi	в 8132 На	rding Ave.	#7	Miami	Beach,	FL 33141	
VP Francesca E. Bassak	yrou 8132 Ha	ording Ave.	#7	Miami	Beach,	FL-33141	,
10. I certify that I am an officer or director or the this reInstatement application, the reason for owed by the conception have been paid and	eceiver or trustee empowered to exdissolution has been eliminated, the	kecute this application	as provided for in ch	apter 607 or	617, F.S. I furn	ther certify that wh	en filling

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 OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Francesca Bassakyrou

Daytime Phone #

F&M of Miami B., Inc. 7411 Carlyle Av. Miami Beach, Fl 33141



July 24th, 2002

Division of Corporation P.O. Box 6327 Tallahassee, FI 32314

RE: #P0000045047

Attn: Michele Milligan

I was told that a rejection was mailed to me on June 4th, 2001. I never received it. The only thing I received was the dissolution notification a few weeks ago.

I am kindly requesting that you waive the penalty fees and reinstate my corporation. Please find attached a check in the amount of \$150.00 together with the reinstatement application.

Thank you for your understanding.

Sincerely,

Francesca Bassakyrou

305-867-8741

Mailing address: 8132 Harding Ave # 7

Miami Beach, Fl 33141