

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **P00000045270**

1. Corporation Name

GOLD AND DIAMOND LINK, INC.

Principal Place of Business

5729 CALAIS BLVD. NORTH
UNIT 6
ST. PETERSBURG FL 33714

Mailing Address

5729 CALAIS BLVD. NORTH
UNIT 6
ST. PETERSBURG FL 33714

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/03/2000

5. FEI Number

59 369 5714

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	KASSIS, MARLINE Y	5729 CALAIS BLVD. NORTH, UNIT 6	ST. PETERSBURG FL 33714

000004687620--7
-11/13/01--01066--009
****158.75 ****158.75

8. Name and Address of Current Registered Agent

KASSIS, MARLINE Y
5729 CALAIS BLVD. NORTH
UNIT 6
ST. PETERSBURG FL 33714

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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.

Signature of
Registered Agent

Marline Y Kassis
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10/16/01

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:

Marline Y Kassis
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/16/01

(727)
433-
1023

CR2040 (8/01)

Zaf

Gold And Diamond Link, Inc.
5729 Calais Blvd. North, Unit 6
St. Petersburg, FL 33714
PHONE: 727-433-1023 FAX: 727-528-4450

October 16, 2001

Florida Department of State
Kathy, Corporate Specialist
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Ms. Kathy:

Per our phone conversation attached you will find my check #102 in the amount of \$158.75 for my Annual Report Fee and the Certificate of Status. I am requesting that you reinstate me and waive the \$600.00 fee. I did not file on time because I never received the UBR report form.

Please reinstate my corporation Document # P00000045270. Thank you very much for your help regarding this matter.

Sincerely,

Marline Kassis

Marline Kassis
President