

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 03 OCT 13 AM 8:00

DOCUMENT # **P0000101733**

1. Corporation Name

N & K CONVENIENCE STORE, INC.

Principal Place of Business

2000 N WASHINGTON BLVD
 SARASOTA FL 34234

Mailing Address

2000 N WASHINGTON BLVD
 SARASOTA FL 34234



REINSTATEMENT 03 MRD

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

10/27/2000

5. FEI Number

65-1060789

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	NIMER, NABIL	2927 CORTEZ ROAD W	BRADENTON FL 34207
VFS	KABANNI, ISA O	6011 MEDICI COURT APT 205	SARASOTA FL 34243

000023764998
 10/13/03--01094--007 **150.00

8. Name and Address of Current Registered Agent

KABANNI, ISA O
 6011 MEDICI COURT #205
 SARASOTA FL 34234

9. Name and Address of New Registered Agent

Name **ISA KABANNI**
 Street Address (P.O. Box Number is Not Acceptable) **7109 42 MD CT E**
 Suite, Apt. #, Etc.
 City **SARASOT** State **FL** Zip Code **34243**

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

Waleed M. Nwa
X Frank Kabanni

Date **10-10-03**

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)(l), 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

Date

Daytime Phone #

Waleed M. Nwa
X Frank Kabanni

10-10-03

CR20040 (7/03)

N & K Convenience Store, Inc.
2000 North Washington Boulevard
Sarasota, FL 34234

October 9, 2003

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: P00000101733, N & K Convenience Store, Inc.

Dear Sirs;

I am a small business owner, and always remit payments in a timely fashion. It has only now come to my attention that the filing fee for year 2003 was not paid. I do not recall receiving the original forms. It may have been overlooked, due in part to all the excitement surrounding the birth of my first child. I am asking that your office please consider reinstating this corporation, as I have enclosed a check in the amount of \$150.00.

If you have any questions, please contact me.

Sincerely,

Isa Kabanni, Pres.

Isa Kabanni
Isa Kabanni

NOTE: Dear sir: we didn't receive the renewal
notice because it was sent to an old address
Please note our new address