

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 MAY 14 PM 1:43

DOCUMENT # P06000116685

1. Corporation Name  
O & O holdings, Inc

2ne 40st miami florida 33137  
2ne 40st miami florida 33137

2. Principal Office Address  
2ne 40st miami florida 33137

3. Mailing Office Address  
2ne 40st miami florida 33137

Suite, Apt. #, etc.  
suite 403

Suite, Apt. #, etc.  
suite 403

City & State  
Miami

City & State  
Miami

Zip Country  
33137

Zip Country  
33137

REINSTATEMENT 03-04

300037026903

5/15/24/04--01017--021 \*\*\*308.75

4. Date Incorporated or Qualified  
To Do Business in Florida 12/22/2000

5. FEI Number  
65-1070403

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ 38.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name  
Ehud Zidon

Street Address (P.O. Box Number is Not Acceptable)  
511 SE 18th Ave

Suite, Apt. #, Etc.  
Pompano

City  
Pompano

State Zip Code  
FL 33060

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 5/13/04

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

| Titles  | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip      |
|---------|--------------------------------------|---|-------------------------|
| D-Pres  | Ehud Zidon                           | 511 SE 18th ave                                   | Pompano Beach, FL 33060 |
| D-V.Prc | Oren Cohen                           | 2 NE 40th St. suite 301                           | Miami, FL 33137         |
|         |                                      |   |                         |
|         |                                      |   |                         |
|         |                                      |   |                         |
|         |                                      |   |                         |

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:

Ehud Zidon Pres  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

may-13-04

Date

305-573-7368

Daytime Phone #

CR2E081 (01/04)

**O & O Holdings  
2 ne 40<sup>th</sup> St. suite 502  
Miami FL 33137**

**Telephone 305-57764744 Fax 305-5764899**

**May 13<sup>th</sup>, 2004**

**Division of Corp.**

**RE: Document DOC # PO- 0000116685**

**Please be Advised that we did not receive over 2003 annual report, please correct mailing address to the above. Please accept \$ 308.75 to reinstate the issue CGS.**

**Yours truly,**

  
**Ehud Zidon**