

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
~~REINSTATEMENT~~



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

03 APR -4 AM 6:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000003182

1. Corporation Name

INFINITY INTERNATIONAL INCORPORATION

Principal Place of Business

Mailing Address

11142 N. 30TH STREET  
TAMPA FL 33612

11142 N. 30TH STREET  
TAMPA FL 33612

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

4. Date Incorporated or Qualified  
To Do Business in Florida

01/04/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-3691500

Not Applicable

Zip

Country

Zip

Country

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
PSD	MANSOUR, ZUHDI	11142 N. 30TH STREET	TAMPA FL 33612
VTD	BAHLOUL, WISSAM	11142 N. 30TH STREET	TAMPA FL 33612
PSD	MOSTAFA, BAHLOUL	11142 N. 30TH STREET	TAMPA, FL 33612

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KAYALI, OSAMA S  
7628 N. 56TH STREET  
SUITE 2  
TAMPA FL 33617

Name

WISSAM BAHLOUL

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

11142 N. 30TH STREET

Suite, Apt. #, Etc.

TAMPA, FL 33612

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

3/28/03

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:

SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/28/03

Daytime Phone #

INFINITY INTERNATIONAL INCORPORATION

11142 N. 30<sup>TH</sup> STREET

TAMPA, FL 33612

282

March 28, 2003

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir/ Madam:


Please find attached the application for reinstatement along with a check for \$300.00 representing annual renewal fees for 2002 and 2003. We are requesting your reconsideration of the amount charged for reinstatement of the corporation. This was the first time we received any correspondence from you regarding the business report. Also, it is only when we received this notice that we became aware of the fact that an annual renewal is required.

Please accept our check as a settlement for both years. As a small corporation, the reinstatement amount required will impose hardship on our operation.

If you have any question, please call me at (813) 979-1121.

Your immediate attention will be greatly appreciated.

Sincerely,

  
Wissam Bahloul  
Vice President