

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 APR 22 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P01000056243

1. Corporation Name

Sam's Window & Doors Inc.
6712 Dogwood Dr.
Miramar, FL 33023-4849

2. Principal Office Address

6712 Dogwood Dr 6712 Dogwood Dr

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

MIRAMAR FL MIRAMAR FL

Zip

Country

Zip

Country

33023 BROWARD 33023 BROWARD

**4. Date Incorporated or Qualified
To Do Business in Florida**

6-5-01

5. FEI Number

65-1106455

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DHARAMDATH HANOMAN

200005396792-1

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

6712 Dogwood Dr

-05/01/02--01014--027

****150.00 ****150.00

Suite, Apt. #, Etc.

City

MIRAMAR

State

FL

Zip Code

33023

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 3-10-02

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	PRESIDENT DHARAMDATH HANOMAN	6712 Dogwood Dr MIRAMAR FL 33023	MIRAMAR FL 33023

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:

[Signature] D. Hanoman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-02

Date

Daytime Phone #

(954) 914 3284

CR2E081 (9/01)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 12, 2002

ORCA FAST TRADING, INC.
6993 N.W. 50TH STREET
MIAMI, FL 33166

SUBJECT: ORCA FAST TRADING, INC.
Ref. Number: G17969

We have received your document for ORCA FAST TRADING, INC. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because your reinstatement was not completed in time for you to receive a 2002 annual report form/uniform business report, we must collect the fee(s) due for the current calendar year. Therefore, the total amount due to reinstate the entity is \$150.00.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Barbara Mitchell
Document Specialist

Letter Number: 502A00021870

*Paid check over fast
4737 4/18/02
\$150.00*