

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P01000104659

02 NOV -6 AM 8:38

1. Corporation Name

5 STAR INDIA CUISINE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8000008837208
11/06/02--01134--016 ***130.00

Principal Place of Business

2602 GILSON COURT
ORLANDO FL 32835

Mailing Address

2602 GILSON COURT
ORLANDO FL 32835

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

10/29/2001

5. FEI Number

59-3755748

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
P	SHAH, RAJBIR S	2602 GILSON COURT	ORLANDO FL 32835

8. Name and Address of Current Registered Agent

DASSAN, MANJIT
4832 MARK TERRACE
ORLANDO FL 32811

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

CR2040 (8/02)

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 10/29/02

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 10/29/02

Daytime Phone #

2012

**Star India Cuisine, Inc.
Dba/ Flavours of India
7000 So. Kirkman Rd.
Orlando, Fl. 32819**

October 24, 2002

**Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327**

Re: 5 Star India Cuisine, Inc. PO1000104659

To Whom It May Concern:

Please be advised that we did not receive any UBR notices regarding the above corporation.

Please reinstate our corporation as soon as possible. Thank you for taking care of this matter for us. Enclosed please find our check in the amount of \$150.00.

Sincerely


5 Star India Cuisine, Inc.