

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

9005

FILED
06 JAN 18 PM 4:34

DOCUMENT # P02000055230

1. Corporation Name

REEM FOOD MARKET

2. Principal Office Address

18350 NW 47th Ave.

Suite, Apt. #, etc.

3. Mailing Office Address

18350 NW 47th Ave.

Suite, Apt. #, etc.

City & State

MIAMI

City & State

MIAMI

Zip

33055

Country

Zip

33055

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/17/2002

5. FEI Number

01-0695059

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

300065111223

02/03/06--01004--008 **300.00

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

SALEH, NOOREDDIN A.

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

18350 NW 47TH AVE.

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33055

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

Noor Saleh
REGISTERED AGENT MUST SIGN

Date 01/12/2006

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 |
|--------|--------------------------------------|---|--------------------|
| P | SALEH, NOOREDDIN A | 183 N.W. 47Th Ave. | Miami, FL 33055 |
| | | | |
| | | | |
| | | | |
| | | | |
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B 1/20/06
REINSTATEMENT
01-05-06

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 contained in Chapter 119, 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:

Noor Saleh

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/12/2006

Date

305-298-3886

Daytime Phone #

KATTOURA & ASSOCIATES, INC.

ACCOUNTING, BOOKKEEPING & TAX SERVICES

Page 2 of 2

1499 West Palmetto Pk Rd
Suite 416
Boca Raton, FL 33486
TEL: (561) 362-0491 FAX: (561) 394-5134

National Society of Tax Professional

January 12/2006

Division of Corporation
Registration Section
P.O. Box 6327
Tallahassee, FL 32314
Reinstatement Section

REF: REEM FOOD MARKET, INC.
DOCUMENT #P02000055230

Dears Sirs,

The above referenced corporation has never received any notices before at all. We are enclosing the reports and the check in the amount of \$ 300 for the years 2004 and 2005.

Please accept this annual report as reinstatement.

- Although we would like to verify our client address currently is the right one as we show in the annual report form.
- Thank you for your cooperation in this matter.

If you have any further question, please do not hesitate to contact us.

Sincerely


Andre K Kattoura

Enclosure (s)

Check \$ 300.00 Annual Report 2004 and 2005.