

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT 13 AM 8:00

DOCUMENT # **P02000087518**

1. Corporation Name

**FLASH HOLDINGS USA CORP.**

Principal Place of Business

3447 SABAL SPRINGS BLVD  
N FT MYERS FL 33917

Mailing Address

3447 SABAL SPRINGS BLVD  
N FT MYERS FL 33917



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

**3347 SABAL SPRINGS BLVD**

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

**3347 SABAL SPRINGS BLVD**

Suite, Apt. #, etc.

City & State  
**N. FORT MYERS, FL**

Zip **33917** Country **LEE USA**

City & State  
**N. FORT MYERS, FL**

Zip **33917** Country **USA**

**REINSTATEMENT** *Q3 mes*

4. Date Incorporated or Qualified  
To Do Business in Florida

**08/12/2002**

5. FEI Number

**33-1054165**

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
D	JIBAI, HUSSEIN A	3447 SABAL SPRINGS BLVD	N FT MYERS FL 33917
D	JEBAI, PEDRO K	3447 SABAL SPRINGS BLVD	N FT MYERS FL 33917
D	JEBAI, FATIMA I	3447 SABAL SPRINGS BLVD	N FT MYERS FL 33917

**600023765196**  
**10/13/03--01094--014 \*\*150.00**

8. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

9. Name and Address of New Registered Agent

Name

**HUSSEIN A. JIBAI**

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

**3347 SABAL SPRINGS BLVD**

Suite, Apt. #, Etc.

City

**N. FORT MYERS**

State

**FL**

Zip Code

**33917**

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**

Date

REGISTERED AGENT MUST SIGN

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**

**HUSSEIN A. JIBAI**

**10-09-03**

**(239) 731-3200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**PRESIDENT**

Date

Daytime Phone #

**Flash Holdings USA Corp.**  
**3347 Sabal Springs Blvd**  
**N. Fort Myers, FL 33917**  
**Phone (239) 731-3200**

October 9, 2003

Division Of Corporations  
Annual Report/ Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Ref: Document Number P02000087518

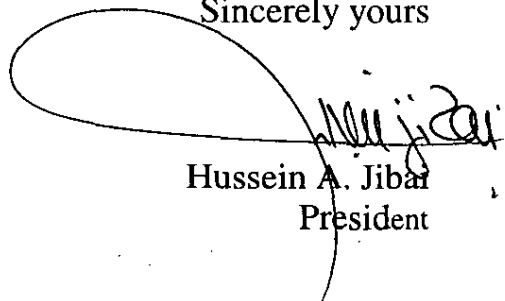
Dear Sir or Madam:

Please be advised that the two prior uniform business report UBR notices for this corporation were not received. We are hereby requesting that the reinstatement fee to be waived.

Attached please find the signed reinstatement form and our check number in the amount of \$150.00 (one hundred fifty US dollars) to return the company to an active status.

Your prompt attention to this above matter is highly appreciated. If you need any further information, please do not hesitate to contact me.

Sincerely yours



Hussein A. Jibar  
President