

1072

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN 27 PM 4:43

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000103049

1. Corporation Name

MARVAN INVESTMENT GROUP, INC

REINSTATEMENT 04-05

2. Principal Office Address

8320 W. SUNRISE BLVD

Suite, Apt. #, etc.

#100

3. Mailing Office Address

8320 W. SUNRISE BLVD

Suite, Apt. #, etc.

#100

City & State

PLANTATION FL

City & State

PLANTATION FL

Zip

33322

Country

BROWARD

Zip

33322

Country

BROWARD

4. Date Incorporated or Qualified
To Do Business in Florida

2003

5. FEI Number

90-0047796

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

\$ 150.00

7. Name and Address of Current Registered Agent

Name

SHIRELLE TIANVAN

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

9345 S. CHELSEA

Suite, Apt. #, Etc.

City

PLANTATION

State

FL

Zip Code

33324

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]

Date 11-14-04

REGISTERED AGENT MUST SIGN

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
PRES	ALI-MARVAST	8320 W. SUNRISE BLVD	PLANTATION FL 33322
VICE PRE	SHIRELLE TIANVAN	9345 S. CHELSEA DR	PLANTATION FL 33324
			200045964642 02/03/05--01010--005 **150.00
			900042937509 11/22/04--01087--006 **150.00

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)(b), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shirelle TianVan

Date

11-14-04

Daytime Phone #

Ph - 954-646-2600

CR2E061 (01/04)

2 of 2

Marvan Investment Group Inc.
8320 W Sunrise Blvd #100
Plantation, FL 33322
Ph-954-646-2600 Fax-954-423-2955

January 26, 2005

FLORIDA DEPARTMENT OF STATE
Division of Corporations
409 E Gaines St
Tallahassee, Florida 32399

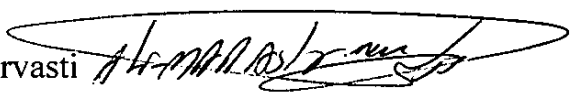
Attn: Re-instatement Dept. for Corporations
Re: P02000103049

Dear Sir/ Madam

We received your letter but because, I was out of town
When it was sent I am just now able to respond. I never received the annual
report from your office. I have enclosed a check in the amount of \$150.00
for 2005 fees.

If you have any further questions I can be reach at 954-646-2600.

Thank You,

Ali Marvasti 
President
Shirelle Tianvan- Vice President

AM/lb