

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

03 OCT 10 PM 3:44

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # **P02000114401**

1. Corporation Name

**AGRANI 123 INC**

Principal Place of Business

6576 WEST ATLANTIC AVE  
DELRAY BEACH, FL 33446

Mailing Address

6576 WEST ATLANTIC AVE  
DELRAY BEACH, FL 33446

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

10/24/2002

5. FEI Number

65-1161905

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
PD	ISLAM, MANZURUL	1525 N.W 3RD ST , SUITE #14	DEERFIELD BEACH FL 33442
SD	ISLAM, HUZATUL	135 N.E. 1ST AVE, APT#8	DELRAY BEACH FL 33444
TD	MAIAH, LAYAK	204 S.W.3RD AVE	BOYNTON BEACH FL 33435

700023700737  
10/10/03--01022--006 \*\*150.00

8. Name and Address of Current Registered Agent

MAIAH, LAYAK  
204 S.W. 3RD AVE  
BOYNTON BEACH FL 33435

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

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

*Huzatul Islam*  
REGISTERED AGENT MUST SIGN

Date 10.8.03

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:

*Huzatul Islam*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10.8.03

Daytime Phone #

CR2E040 (7/03)

# POINT CLEANERS

6576 West Atlantic Avenue Delray Beach, FL 33446  
(561) 499-6956

10/8/03

To Whom This may concern.

I am sorry for filing  
my application late. I  
didn't receive the renewal  
application until now.

~~I will appreciate it~~

POINT CLEANERS

~~very much if you accept  
my renewal application.~~

~~Thank you very much in  
advance.~~

Very truly yours.

Huzzeel Hae. (ISLAM HUZZEEL)  
Vice President