

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 DEC 17 AM 8:00

DOCUMENT # P02000132672

**1. Corporation Name**

Majumder Garments USA, Inc.

7737 N. University Drive

Same

**2. Principal Office Address**

7737 N. University Drive

**3. Mailing Office Address**

Same

Suite, Apt. #, etc.

Suite # 201A

Suite, Apt. #, etc.

City & State

Tamarac, Florida

City & State

Zip

33321

Country

USA

Zip

Country

**REINSTATEMENT**

10/1/03 01047 029 \*300.00

10/1/03 01047 028 \*250.00 MRS

**4. Date Incorporated or Qualified  
To Do Business in Florida**

**5. FEI Number**  
33-1063995

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Weiss Michael N

Street Address (P.O. Box Number is Not Acceptable)  
1401 Brickell Ave.

Suite, Apt. #, Etc.

Suite 300

City

Miami

State  
FL

Zip Code  
33132

**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

M Weiss

Date 12/13/2004

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
D	Mainul H. Majumder	7737 N. University Drive, # 201 A.	Tamarac, FL 33321

**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)(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:

M Majumder (MAINUL MAJUMDER)

12/13/2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED01 (01/04)