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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 MAY -8 AM 8:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P05000030728*

1. Corporation Name

Sivan Jewelry, Inc

REINSTATEMENT *06-08*

2. Principal Office Address - No P.O. Box #

174 NE 96 Street

Suite, Apt. #, etc.

3. Mailing Office Address

174 NE 96 Street

Suite, Apt. #, etc.

City & State

Miami Shores FL

City & State

Miami Shores FL

Zip

33138

Country

US

Zip

33138

Country

US

CR2E081 (12/07)

4. Date Incorporated or Qualified
To Do Business in Florida

2/25/2005

5. FEI Number

20-2395258

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

PBA Financial Services Corp

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

174 NE 96 Street

Suite, Apt. #, Etc.

City

Miami Shores

State

FL

Zip Code

33138



The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

5/2/2008

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
<i>P</i>	<i>Roshel Itzhakov</i>	<i>3015 NW 79th St. C6-7</i>	<i>Miami, FL 33147</i>

300130901853
*06/05/08--01018--005 **450.00*

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roshel Itzhakov / Pres. 5/1/08

Date

Daytime Phone #

jc 5/15

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April 21, 2008

Reference: P05000030728

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

SUBJECT: REINSTATEMENT OF CORPORATION

Please be advised by this letter that notices to renew Sivan Jewelry Inc were never received. The company was dissolved in 2006 for non filling of annual report. This is a request to reinstate the entity and to waive the fee for the reasons already mentioned. I am attaching a check with a payment of \$450.00 for reinstatement.

If you have any questions regarding this letter, please do not hesitate to contact my office at the number below:

Sincerely,

A handwritten signature in black ink, appearing to read "Sandra Perez".

Sandra Perez
CEO
PB&A Financial Services