

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAY 30 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000068931**

1. Corporation Name

Nada Food Corporation

2. Principal Office Address

744 SW 8th Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Homestead, FL

City & State

Same

Zip
33030

Country
USA

Zip
Same

Country
Same

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
65-0520820

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
Fatmeh A. Daymen

Street Address (P.O. Box Number is Not Acceptable)
744 SW 8th Avenue

Suite, Apt. #, Etc.

City
Homestead

State
FL

Zip Code
33033

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

Fatmeh A. Daymen

REGISTERED AGENT MUST SIGN

Date **May 26, 2006**

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
P	Fatmeh A. Dayem	744 SW 8th Avenue	Homestead, FL 33033
	<i>5/18/06</i>		

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:

Fatmeh A. Daymen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 26, 2006

Date

Daytime Phone #

TO: Florida Department of State

FROM: Fatmeh A. Dayem
Nada Food Corporation
FEI: 65-0520820

DATE: May 26, 2006

RE: Reinstatement Application

I was recently made aware by our accountant that our corporation status has been inactive since 2004 due to non-payment of annual filing fee. I explained to her that we never received any notice indicating that we needed to file an annual report and pay the annual filing fee.

Thank you for your attention in this matter.

** Fatmeh A. Dayem*
Fatmeh A. Dayem