PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED FLORIDA DEPARTMENT OF STATE CORPORATION 03 MAY 16 AM 10: 52 Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** SECRE HIT OF STATE TALLAHASSEE. FLORIDA DOCUMENT# P95000000638 1. Corporation Name SASHA, INC. 2. Principal Office Address 6665 Boynbon Beach Blvd. 3. Menting Office Address C/O Norman's of New York 6665 Boynton Beach Blvd Suite, Apt. #, etc. Suite, Apt. #, etc. Suites 19 & 20 Date incorporated or Qualified Suites 19 & 20 To Do Business in Florida ≈04**-**95 City & State ----City & State 5. FEI Number Applied/For wh Boynton Beach, FL Boynton Beach, 65-0553499 nor Applicable Palm Beach Zip - - -Country \$875 Additional Fee required 33437 CERTIFICATE OF STATUS DESIRED 33437 Palm Beach or a Certificate of Status 7. Name and Address of Current Registered Agent Name Judi Artzt Street Address (P.O. Box Number is Not Acceptable) 6665 Boynton Beach Blvd. Suite, Apt. #. Etc. Suites 19 & 20 Zip Code State 33437 Boynton Beach 8. I, being appointed the poration, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent ED AGENT MUST SIGN Addresses of Each Officer and/or Calctor (Florida nonprofit corporations must list at least 3 directors) 9. Names and Street Address of Each Officer and/or Director Name of Titles City / State / Zip Officers end/or Directors 6665 Boynton Bch. Blvd. Boynton Beach, FL 33437 Judi Artzt S Suites 19 & 20 6665 Boynton Bch. Blvd. Boynton Beach, FL 33437 Norman Artzt - P Suites 19 & 20 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 filling 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/hames 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 accur me legal effect as if made under oath. SIGNATURE: THIS OFFICER OR DIRECTOR



## GOLDMAN, DASZKAL, CUTLER, BOLTON & KIRBY Attorneys at Law

ALEX DASZKAL GLENN GOLDMAN KENNETH A. CUTLER

Brian Bolton Jeffrey D. Kirby

May 12, 2003

Secretary of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE: SASHA, INC.

Dear Sir/Madam:

The 2002 and 2003 Uniform Business Report forms were not received because the address was wrong on the documents. The correct address is 6665 Boynton Beach Boulevard, not 6615 Boynton Beach Boulevard.

Enclosed is a check in the amount of \$300.00 representing the filing fees for 2002 and 2003.

Thank you for your attention to this matter.

Sincerely,

ALEX DASZKAL, ESQUIRE

AD:ll Enclosures cc: Client

the alliant was