

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **095000003944**

1. Corporation Name

Icone Import and Export Inc

2. Principal Office Address

7601 East Treasure Dr.

Suite, Apt. #, etc.

1102

City & State

North Bay Village FL

Zip

33141

Country

USA

3. Mailing Office Address

7601 East Treasure Dr.

Suite, Apt. #, etc.

1102

City & State

North Bay Village FL

Zip

33141

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

01/01/96

5. FEI Number

65.2471282

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

Fabiola Coutinho

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

7601 East Treasure Drive

Suite, Apt. #, Etc.

1102

City

North Bay Village

State

FL

Zip Code

33141

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

Fabiola Coutinho

REGISTERED AGENT MUST SIGN

Date

02/28/00

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/S	Fabiola Coutinho	7601 E. Treasure Dr. 1102	N.B. Village FL 33141

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:

Fabiola Coutinho
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

02/28/00

Daytime Phone #

305-864-7420

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ICONE IMP. EXP. INC.

7601 East Treasure Drive
Suite 1102
North Bay Village - Fl - 33141
Phone (305) 864-7420
Fax (305) 864-0909
iconeexport@aol.com

February 28, 2000

Department of State
Davison of Corporations
P.O. Box 6327
Tallahassee - Fl
32314

Ref.: Reinstatement of ICONE IMPORT & EXPORT INC.

Dear Sirs,

This is a request for a corporation reinstatement fee discount.

The reason for such a request is that we were not aware of such tax and we were never advised by our accountant about this fee.

We just hired another accountant and we would like to fix all the other mistakes that the prior CPA did. Since we are in the process of restructuring the company and hiring another employee, I really appreciate if you could consider our request for the desired discount.

I also, would like to stress that from now on I will make sure that all corporation taxes are paid before the due date.

If there is any additional information you might need, please feel free to contact me.

Looking forward to hear from you,


Fabiola Coutinho
President/CEO/Officer