

1999 13:50 COREY J. LEVINE, CPA  
APPROVED FOR REINSTATEMENT  
FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # PAS 000030477

1. Corporation Name

A.A.I.S. INCORPORATED

Principal Place of Business

Mailing Address

2703 Nassau Bend F-2

Same

Coconut Creek, Fl. 33066

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable

2703 Nassau Bend F-2

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

F-2

Suite, Apt. #, etc.

City & State

Coconut Creek, Fl

City & State

Zip

33066

Country

USA

Zip

Country

4. Date Incorporated or Qualified

April 14, 1995

5. FEI Number

65-0626288

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P	Allen Albert	2703 Nassau Bend F-2	Coconut Creek, Fl 33066

8. Name and Address of Current Registered Agent

Allen Albert

2703 Nassau Bend F-2

Coconut Creek, Fl. 33066

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505 F.S.

Signature of Registered Agent

Allen Albert

REGISTERED AGENT MUST SIGN

Date 2/17/99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒

No ☐

(See other side for information on intangible tax.)

12. 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.

Allen Albert

SIGNATURE: Allen Albert, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/99

Date

954-917-0565

Daytime Phone #

TOTAL P.01

P.01/01

200002787952--S

-02/25/99--01100--006

\*\*\*300.00 \*\*\*300.00

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A.A.I.S. INCORPORATED  
2703 NASSAU BEND F-2  
COCONUT CREEK, FL 33066  
954-917-0565  
FAX 954-917-0566

February 17, 1999

TO:

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

Dear Sandra S. Mortham,

My name is Allen D. Albert. I am the sole officer of A.A.I.S. Incorporated. In 1996, I moved and notified the Department of Corporations of my change of address. However, inadvertently, the change of address was only made to the registered agent's address and not to the principal address of the corporation. The post office will only forward mail for a certain period of time and I never received the 1998 & 1999 forms. In the past I have complied with my responsibility in a timely manner.

In addition, I am the Registered Agent for this Corporation and the Division of Corporations has my current address on file. However, I was never notified that the appropriate forms and fees were not paid last year. Consequently, on October 16, 1998, with out any notice to me, the Division of corporations dissolved my Corporation.

I have completed the application for reinstatement and included a check for \$300.00, as I was told to do on the phone. I would appreciate your reinstating my corporation as soon as possible and correcting my address and to avoid any future mishaps. I also would appreciate your waiving any penalties that may arise because of this inadvertent mistake.

If there are any questions or other information that you may require, please feel free to contact me at the address or phone number listed above. Respectfully submitted by.

Enclosures;



Allen Albert  
2703 Nassau Bend F-2  
Coconut Creek, FL 33066  
954-917-0565  
Fax 954-917-0566