

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 APR 13 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000065914**

1. Corporation Name

GULRAIHAN CORPORATION INC.

Principal Place of Business

Mailing Address

**4000 S.W. 40TH AVE
PEMBROKE PARK FL 33023**

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

2. New Principal Office Address, If Applicable

4000 S.W. 40TH AVE.

3. New Mailing Office Address, If Applicable

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PEMBROKE PARK FL 33023

City & State

Zip

33023

Country

FLORIDA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1996

5. FEI Number

65-0603696

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
PRESIDENT	MOHAMMAD A. HOSSAIN	675 IVES DAIRY RD #220	N. MIAMI BEACH FL 33023
			400002491564-3
			-04/17/98--01006--026
			***1058.75 ***1058.75
		PAID CHK #0095	\$1058.75

REINSTATEMENT

96-98
A. Alwan

8. Name and Address of Current Registered Agent

MOHAMMAD HOSSAIN
4000 S.W. 40TH AVE
PEMBROKE PARK FL 33023

9. Name and Address of New Registered Agent

Name

SAME

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

Mohammad Alwan

REGISTERED AGENT MUST SIGN

Date

04/09-98

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.

SIGNATURE:

Mohammad Alwan **MOHAMMAD HOSSAIN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-09-98 (951/894-6624)

CR2E040 (1/98)