

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

John B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED *9/19/96*
AND
FILED

1996 OCT 28 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000094761

1. Corporation Name

CHARISMA, INC.

Principal Place of Business

15072 SW 72ND ST
MIAMI FL 33183

Mailing Address

15072 SW 72ND ST
MIAMI FL 33193

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/11/1995

5. FEI Number

65-0684736

☒ 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
	PRESIDENT SHEZAD CONTRACTOR 15072 SW 72 ST. MIAMI FL 33193		900001995349--7 -11/04/96--01046--010 ****225.00 ****225.00
	V.P./SEC/TREASURER/DIR NAJMA KIDWAI 15072 SW 72 ST. Miami FL 33193		700001995349--7 -11/04/96--01046--010 ****225.00 ****225.00
	DIR SHAHAB KIDWAI 15072 SW 72 ST. Miami FL 33193		

8. Name and Address of Current Registered Agent

CONTRACTOR, SHEZAD
15072 SW 72ND ST
MIAMI FL 33193

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

Shezad Contractor
REGISTERED AGENT MUST SIGN

Date

9/19/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/19/96 (305)-
Daytime Phone #

pg 2 of 2

M. JOE ISMAIL, CPA
7855 N.W 12TH STREET # 206
MIAMI, FL 33126
(305) 594-9198

September 19, 1996

Florida Department of State
Division of Corporation
Annual Report/Reinstatement Section
Tallahassee Fl 32314-6327

Charisma, Inc. 65-0684736
Annual Report

Dear Sir/Madam:

Our client filed for the annual report on June 6th, however the report was sent him back because of the FEI number was not provided.

Our client's attorney applied for the FEI number at the time when the business was purchased. However, the IRS did not response regarding the FEI.

We wrote a letter to the IRS (see attached) regarding the situation. Subsequently, the IRS issued a FEI number for the corporation.

Our Client was new in the business, and he was ill advised. Furthermore, he did not know what to do in that particular situation.

Please consider our request, and abate the late filing penalty of \$ 150.00

Thank You

Salim Ghulamali

Salim Ghulamali
cc. client's file