

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1072

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **P96000017232**

1. Corporation Name

BASHAR, INC.

FILED
97 JUL 10 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing Address

BASHAR INC. DBA
NARANJA FOOD STORE
27801 SOUTH DIXIE HIGHWAY
NARANJA, FLORIDA 33186

Principal Place of Business

BASHAR INC. DBA
NARANJA FOOD STORE
27801 SOUTH DIXIE HIGHWAY
NARANJA, FLORIDA 33186

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

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable

3. New Principal Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

02-26-1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0645599

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
D	BASSAM EGHNEIM	12240 SW 91 TRR. #512 MIAMI, FL 33186	MIAMI, FL, 33186
			700002237767--8 -07/14/97--01169--020 ****165.00 ****165.00

UPB
7-14-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BASSAM EGHNEIM
12240 SW 91 TRR. #512
MIAMI, FL 33186

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

REGISTERED AGENT MUST SIGN

Date **07-07-97**

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐

(See other side for additional information)

12. 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.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

BASSAM EGHNEIM
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/07/97
 Date
305-245-3375
 Daytime Phone #

202

BASHAR, INC.
27801 S. DIXIE HWY
NARANJA, FL 33032
(305) 245-4220

July 7, 1997

REINSTATEMENT SECTION
Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: BASHAR, INC.

Dear LORIA POOLE:

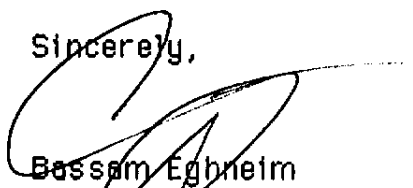
Enclosed please find an Application For Reinstatement of the Corporation of BASHAR, Inc. We are requesting a waiver of the late fees due to a change of address and not receiving the Corporation Annual Report.

Also enclosed please find a check for \$165.00 as filing fee.

Please file the enclosed Application For Reinstatement with the Department of State. A Certified Copy is not necessary.

Thank you for your cooperation to this matter.

Sincerely,



Bassam Eghneim
President