

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

00 SEP -8 PM 4: 20

Read Instructions on Other Side Before Making Entries
Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT # *996000025203*

*S.U.S. Investments #112, Inc.
7284 W. Palmetto Park Road
Suite 101S
Boca Raton, FL 33433*

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The name of the corporation can be changed only by filing an amendment.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Address

Address

City and State

REINSTATEMENT *97-00*

3. Date Incorporated or Qualified
To Do Business in Florida

3/18/90

4. FEI Number

59-3373912

FEI Number Applied For

FEI Number Not Applicable

5. **\$8.75 Additional Fee required**
for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and/or Director

1 Title	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 and State
<i>P/D</i>	<i>Ali M. Jaferi</i>	<i>7284 W. Palmetto Park Road Suite 101S</i>	<i>Boca Raton, FL 33433</i>
<i>VP/D</i>	<i>Syed M. Raza</i>	<i>7284 W. Palmetto Park Road Suite 101S</i>	<i>Boca Raton, FL 33433</i>

500003406675--8
-09/27/00--01072--010
****1200.00 ***1200.00*

REGISTERED AGENT INFORMATION

8. Name and Address of New Registered Agent and/or Office

Name

Ali M. Jaferi

Street Address (Do NOT Use P.O. Box Number)

7284 W. Palmetto Park Road

Street Address (Do NOT Use P.O. Box Number)

Suite 101S

City and State

Boca Raton

FL.

Zip

33433

7. Name and Address of Current Registered Agent

*Ali M. Jaferi
1701 SW 12th Avenue
Boca Raton, FL 33486*

9. 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

[Signature]

REGISTERED AGENT MUST SIGN

Date

9/6/00

10. 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.)

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.) **RE**

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., 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 of
Officer or Director

[Signature]

Date

9/6/00

Daytime Phone #

(361) 392-9450

Typed or printed name of signing officer or director

Ali M. Jaferi