

FILED

98 DEC -7 AM 11:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

281-78101

APPLICATION  
FOR  
REINSTATEMENTFLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT #P96000077980

Yasin, Inc.  
9600 SW 77th Avenue  
Miami, FL 33156-2615

2. If Address in Block 1 is incorrect in any way, enter the correct address below:

Address

City and State

Zip Code

3. If Principle Office Address is different from mailing address, enter address below:

Address

City and State

Zip Code

4. Date Incorporated or Qualified  
To Do Business in Florida

09-19-1996

5. FEI Number

65-0718942

FEI Number Applied For

FEI Number Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

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
DPST	Yasin, Amir	9600 SW 77th Avenue	Miami, FL 33156

00002706341--0  
-12/08/98-01071--002  
\*\*\*\*315.00 \*\*\*\*315.00

## REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent

Yasin, Amir  
9600 SW 77th Avenue  
Miami, FL 33156

9. If changed, new registered agent / office

Name

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

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

City

State

Zip

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

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 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

Date

Daytime Phone #

(352) 594-9998

**M. JOE ISMAIL, CPA**

7855 N.W. 12<sup>th</sup> Street, 203  
Miami, Florida 33126

Tel.(305) 594-9198  
Fax (305) 594-9947

December 04, 1998

Department of State  
Division of Corporation  
P.O. Box 1500  
Tallahassee, FL 32314

Ref: Yasin, Inc.

Dear Sir/Madam:


Enclosed is the Reinstatement Application for and on behalf of Yasin, Inc.

Please note that the corporation or the stockholder never received the annual registration forms. The reason being that the attorney who handle the initial filing had his address as the mailing address of the corporation.. However, the said attorney has moved his office since and the stockholder or the corporation was not informed of such matters, nor the attorney's office forwarded the annual report(s) to the taxpayer/client.

Kindly accept the application as timely filed.

Thank you very much.

Sincerely,



M. Joe Ismail, CPA