

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 DEC 30 AM 9:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000066840

1. Corporation Name

F & F MANAGEMENT, INC.

Principal Place of Business

106 S. LAKE AVE.
ORLANDO FL 32801

Mailing Address

106 S. LAKE AVE.
ORLANDO FL 32801

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

08/01/1997

5. FEI Number

59-3460950

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	BLACK, RONALD W	106 S. LAKE AVE.	ORLANDO FL 32801
DP3	ASHDJI, FOUAD S.	106 S. LAKE AVENUE	ORLANDO, FL 32801
DYT	ASHDJI, FRANK S.	106 S. LAKE AVENUE	ORLANDO, FL 32801

REINSTATEMENT

98

12/31/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BLACK, RONALD W
106 S. LAKE AVE.
ORLANDO FL 32801

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

700002730587-2

01/05/99-01064-015

***758.75 State Zip 32801 58.75

FL

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Ronald W. Black

Date 12/29/98

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Fouad S. Ashdji, President/Director

12/29/98

Date

(407)
578-6088

Daytime Phone #

CR2E040 (9/88)