PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 APR 22 PM 12:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000069578

1. Corporation Name

AYAAN, INC.

Principal Place of Business | Mailing Address

1338 South Killian Drive, Suite 7
Lake Park, Fl. 33403

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

REINSTATEMENT 05-99

2. New Principal Office Address, If Applicable
1338 S. Killian,
Suite, Apt. #, etc.
Suite 7
City & State
Lake Park, Florida
Zip: 33403 | Country: USA

3. New Mailing Office Address, If Applicable
same
Suite, Apt. #, etc.
same
City & State
same
Zip: same | Country: USA

4. Date Incorporated or Qualified To Do Business in Florida
Aug. 11, 1997

5. FEI Number
65-0790715
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
Pres/ Dir.	Aniqah Quraeshi	1338 S. Killian, Suite 7	Lake Park, Fl 33403

000002685710--5
-04/29/99--01086--024
****908.75 ****908.75

8. Name and Address of Current Registered Agent

Bruce W. Keihner
411 S. County Raod
Suite 200
Palm Beach, Fl. 33480

9. Name and Address of New Registered Agent

Name: Barbara Guncheon
Street Address (P.O. Box Number is Not Acceptable): 1338 S. Killian Drive
Suite, Apt. #, Etc.: Suite 7
City: Lake Park | State: FL | Zip Code: 33403

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: Barbara Guncheon
REGISTERED AGENT MUST SIGN

Date: April 9, 1999

11. This corporation owes 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 of 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: Aniqah Quraeshi Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-99
Date

(561) 848-0000
Daytime Phone #

CR2E061 (12/98)