

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
REINSTATEMENT



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

DOCUMENT # 797000081513

1. Corporation Name

EXPRESS Trading and Investment, Inc

2. Principal Office Address

5610 Granada Blvd

3. Mailing Office Address

P.O. Box 270121

Suite/Apt. #, etc.

B

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33617

Country

Hill sb

Zip

33688

Country

Hill sb

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-07/25/00--01038--006

****300.00 ****300.00

4. Date Incorporated or Qualified
To Do Business in Florida

9-18-97

5. FEI Number

59-3518257

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Nick Refaie

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

5610 Granada Blvd

Suite/Apt. #, Etc.

B

City

Tampa

State

FL

Zip Code

33617

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Nick Refaie

REGISTERED AGENT MUST SIGN

Date 5-25-2000

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles

Name of
Officers and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

D

Refaie Nick

5606 Granada Blvd
Suite B

Tampa, FL 33617

D

Refaie Sam

5606 Granada Blvd
Suite B

Tampa, FL 33617

D

Refaie Ali

5606 Granada Blvd
Suite B

Tampa, FL 33617

10. 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:

Nick Refaie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5-25-2000

Daytime Phone #

CR2E081 (9/99)



5/25/00

To Whom It May Concern:

In response to my phone conversation to your office back on 5/19/2000. I was told to fill in the reinstatement form which was mailed to me last week and send a check for the amount of \$300.00 also to write this letter to confirm the change of addresses for both myself and The corporation. However we have never received any renewal form or notice in regard to our corporation at all in the past year or so. Please be advised that our new address is 5610 Granada Blvd Suite #B. Tampa, FL 33617. And the mailing address is P.O.BOX 270121. Tampa, FL 33688.

Thank you your cooperation in this matter and if need further assistant please call me at (813) 690-1526.

Sincerely,

A handwritten signature in black ink, appearing to read "Nick Refaie", written over a horizontal line.

Nick Refaie