## PLÉASE READ ALL INSTRUCTIONS BEFORE COMPLETING



00 APR -6 AM 8: 38

SECRETARY OF STATE

						•		1月世世代	MASSEE, LE	UKIUA	
UMENT ation Name		3289	_	_					•		
CO, IN	1C.										
		<u> </u>									
	,	3. Mailing Office Address 6915 RED ROAD									
#, etc.		Suite, Apt. #, et	c.				e are res				
re 220_		SUITE	220			4			orida	•	
9		City & State				-					
L GABL			GABL				Ja FEI Numbe		804847	<del> </del>	Applied For Not Applicable
p Country		Zip		Country	7	6	OERTIFICAT	TE OF STATU		75 Addition	nal Fee required
13	USA							EUI UIII	3 00011120	or a Certific	ate of Status
		7. Nan	ne and Ad	idress of	/ Current Reg	jistered /	Agent				_
	Name MAHER AL-SOUFI							പവവ	<u>ማመካፋ</u> ሮ	ما شها سه	. <u>L</u>
Street Address (P.O. Box Number is Not Acceptable)								-0	4/19/000	01093-	-001
J		<del>'</del>			<del></del>				****3NN**NN*	*****	3 <b>00.</b> UU
( <del></del>	JITE 220							7 3			
H .	ORAL GABLES			,				State   FL	Zip Code 33143		
appointed the	a registered agent of the abo	ove named corpora	tion, am fa	miliar wit	th and accept	the obliga	ations of sect	tion 607.050	95 or 617.0503, F.S		
of A								5.1.			·
Agent	R'	EGISTERED AGEI	NT MUST	SIGN			<del></del>	Date _			
and Street A	ddresses of Each Officer an	ct/or Director (Floric	ta nonprof	it corpora	ations must lis	at least	3 directors)				
	Name of Officers and/or Directors			Street Address of Each Officer and/or Director					City / Sta	te / Zip	
MAHER	AL-SOUFI		5915	RED	ROAD,	STE	220	CORA	L GABLES	, FL	33143
								+			
	<del>,</del>										
· · · · · · · · · · · · · · · · · · ·		-						+	<del></del>		
		i i									KE
	ACO, IN  ACO	ACO, INC.  al Office Address  AED ROAD  4, etc.  TE 220  AL GABLES, FL  Country  3 USA  Name  MAHER AL-SOUF  Street Address (P.O. Box Number is N 6915 RED ROAD, Suite, Apt. #, Etc. SUITE 220  City CORAL GABLES  appointed the registered agent of the about fagent  RE  and Street Addresses of Each Officer and Name of	ACO, INC.  al Office Address S RED ROAD 6915 R 6915 R 6915 R City & Suite, Apt. #, etc. CITE 220 SUITE City & State CORAL Country Zip 3 USA 33143 7. Nam Name MAHER AL-SOUFI Street Address (P.O. Box Number is Not Acceptable) 6915 RED ROAD, Suite, Apt. #, Etc. SUITE 220 City CORAL GABLES appointed the registered agent of the above named corporating Agent REGISTERED AGEN Name of Officers and/or Directors	ation Name  ACO, INC.  al Office Address	ation Name  ACO, INC.  al Office Address  5 RED ROAD  6, etc.  CE 220  City & State  CORAL GABLES,  Country  Jusa  To Name and Address of  Name  MAHER AL-SOUFI  Street Address (P.O. Box Number is Not Acceptable) 6915 RED ROAD,  Suite, Apt. #, etc.  SUITE 220  City  Country  To Name and Address of  Name  MAHER AL-SOUFI  Street Address (P.O. Box Number is Not Acceptable) 6915 RED ROAD,  Suite, Apt. #, etc.  SUITE 220  City  CORAL GABLES  appointed the registered agent of the above named corporation, am familiar with  Agent  REGISTERED AGENT MUST SIGN  Name of Officers and/or Directors  Name of Officers and/or Directors  Name of Officers and/or Directors  Officers and/or Directors  Street Officers and/or Directors  Officers and/or Directors	al Office Address al Office Ad	ation Name  ACO, INC.  ACO, INC.	ation Name  ACO, INC.  Solitice Address ACO, INC.  Solitic	JMENT # P98000003289  ation Name  ACQ, INC.  at Office Address  A RED ROAD  Suite, Apt. #, etc.  SUITE 220  Country  3 USA  33143  USA  7. Name and Address of Current Registered Agent  MAHER AL-SOUFI  Suite, Apt. #, etc.  SUITE 220  Country  3 USA  33143  Country  Suite, Apt. #, etc.  CORAL GABLES, FL  CORAL GABLES, FL  Suite Address (P.O. Box Number is Not Acceptable) 6915 RED ROAD,  Suite, Apt. #, etc.  SUITE 220  City  CORAL GABLES  FL  State FL  Agent FEGISTERED AGENT MUST SIGN  Name of Officer and/or Directors  Name of Officer and/or Directors  Name of Officer and/or Directors  Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)	JMENT # P98000003289  ation Name  ACQ, INC.  at Office Address  A RED ROAD  B etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  CORAL GABLES, FL  CORAL GABLES, FL  COUNTY  3 USA  7. Name and Address of Current Registered Agent  Name  MAHER AL-SOUFI  Street Address (P.O. Box Number is Not Acceptable)  6 915 RED ROAD,  Suite, Apt. #, etc.  Suite, Apt. #, etc.  The Address of Current Registered Agent  Name  MAHER AL-SOUFI  Street Address (P.O. Box Number is Not Acceptable)  6 915 RED ROAD,  Suite, Apt. #, etc.  SUITE 220  City CORAL GABLES  FL  State Zip Code  FL  33143  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.  Agent REGISTERED AGENT MUST SIGN  And Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Name of Officers and/or Directors  Name of Officer and/or Directors  City / State  Street Address of Each  Officer and/or Directors  City / State	al Office Address  A CO, INC.  Solite, Apt. #, etc.  Sulte, Apt. #, etc.  Sulte, Apt. #, etc.  CORAL GABLES, FL  CORAL GABLES, FL  Country  3 USA  33143  Country  7. Name and Address of Current Registered Agent  Name  MAHER AL-SOUFI  Street Address (P.O. Box Number is Not Acceptable) 6915 RED ROAD,  Sulte, Apt. #, etc.  Sulte, Apt. #, etc.  The Country  Sulte, Apt. #, etc.  Sulter, Apt. #, etc.  Date  REGISTERIED AGENT MUST SIGN  Agent  Agent  Registered Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Name of Officer and/or Directors  City / State / Zip.

CR2E081 (9/99)

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.

TED NAME OF SIGNING OFFICER OR DIRECTOR

Maher Al-Soufi

04/03/00

(305)663-6200

Daytime Phone #

Ayaco, Inc. 6915 Red Road, Suite 220 Coral Gables, Fl 33143

March 30, 2000

Division of Corporations P.O. Box 6327 Tallahassee, FI 32314

## Gentlemen:

As I explained over the phone, we never received the original form as we moved to our new office in June of 1998. Attached is the reinstatement application, which reflects the new mailing address.

Please note that when we moved we had not been six months in business and we were not familiar with all the annual licenses and fees that we were supposed to pay.

Under the circumstances, we are asking for an abatement of the late penalty fee. We have taken the necessary steps to avoid any late payments in the future.

We are attaching a check in the amount of \$300.00 to cover the 1999 and 2000 fees.

Thank you for your help.

Maher Al Soufi

President

Cc: Toni H. Alam, C.P.A.