


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED

01 OCT 18 PM 2:20

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P98000045088**

1. Corporation Name
HANANIA IMPORTS, INC.

Principal Place of Business Mailing Address
 7600 BLANDING BOULEVARD 7600 BLANDING BOULEVARD
 JACKSONVILLE FL 32244 JACKSONVILLE FL 32244



REINSTATEMENT 2001

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 | | 4. Date Incorporated or Qualified To Do Business in Florida 05/19/1998 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. FEI Number 59-3519532 | |
| City & State | | City & State | | Applied For <input type="checkbox"/> Not Applicable | |
| Zip | Country | Zip | Country | 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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 | 4 City / State / Zip |
|--|-------------------------------------|--|-----------------------|
| PGM | HANANIA, JACK Y | 7600 BLANDING BLVD | JACKSONVILLE FL 32244 |
| S | HANANIA, DEBORAH | 7600 BLANDING BLVD | JACKSONVILLE FL 32244 |
| T | SPENCER, KATHY S | 7600 BLANDING BLVD | JACKSONVILLE FL 32244 |
| LS 200004671092-5 -11/07/01--01063--002 ****750.00 ****750.00 | | | |

| | | | |
|--|--|--|--------------------|
| 8. Name and Address of Current Registered Agent | | 9. Name and Address of New Registered Agent | |
| HANANIA, JACK Y 7600 BLANDING BLVD JACKSONVILLE FL 32244 | | Name | |
| | | Street Address (P.O. Box Number is Not Acceptable) | |
| | | Suite, Apt. #, Etc. | |
| | | City | State 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: *Jacky Hanania* **SIGNATURE REQUIRED** Date: 10-17-01
 REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided 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: *Jacky Hanania* **SIGNATURE REQUIRED** Date: 10-17-01 Daytime Phone #: 904-7775600
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (801)