

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

182

**CORPORATION  
REINSTATEMENT**



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

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P98000071340

**1. Corporation Name**

Zeybek, Inc.

**2. Principal Office Address**

10160 W.Oakland Pk Blvd

**3. Mailing Office Address**

10160 W.Oakland Park Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**City & State**

Sunrise

**City & State**

Sunrise

**Zip**

33315

**Country**

USA

**Zip**

33315

**Country**

USA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

8/14/98

**5. FEI Number**

65-0859328

**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**

John L. Tomlinson

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

500 NW 62nd Street, Ste 455

**Suite, Apt. #, Etc.**

455

**City**

Fort Lauderdale

**State**

FL

**Zip Code**

33309

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\*\*\*150.00 \*\*\*150.00

**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**

*John L. Tomlinson*  
REGISTERED AGENT MUST SIGN

**Date**

10/24/01

**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
PD	Bekir Gesoglu	1852 NW 94th Avenue	Plantation, FL 33322

**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:**

SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bekir Gesoglu 10/24/01 954 771 9336

Date

Daytime Phone #

CR2E081 (9/00)

252

**Zeybek, Inc.**  
10160 West Oakland Park Boulevard  
Sunrise, Florida 33315-6963

October 22, 2001

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Reinstatement P98000071340

Gentlemen:

Last year we moved to the above address and did not receive our renewal notice.

Enclosed please find our \$150 fee renewal fee. We herewith request that you waive the penalty for failure to timely file our 2001 Corporate Annual Report.

Very truly yours

  
Bekir Gesoglu