

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 OCT -5 PM 2: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000091047

1. Corporation Name

Cosmopolitan Trading Systems, Inc.

400110349294
10/05/07--01028--013 **600.00

REINSTATEMENT 04-07
CR2E081(1/07)

2. Principal Office Address - No P.O. Box #

713 NE 8 Street

3. Mailing Office Address

Suite, Apt. #, etc.

OFFICE

Suite, Apt. #, etc.

City & State

HALLANDALE BEACH, FL

City & State

Zip

33009

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/01/1997

5. FEI Number

65-0642732

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

MARKO POPOVIC

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

7500 NW 17 STREET

Suite, Apt. #, Etc.

APT 306

City

PLANTATION

State

FL

Zip Code

33313

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Marko Popovic

REGISTERED AGENT MUST SIGN

Date **10/02/07**

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 |
|--------|--------------------------------------|---|---------------------|
| PRES | NENAD ZIVKOVIC | 7500 NW 17 ST. APT 306 | PLANTATION FL 33313 |
| VP | MARKO POPOVIC | 7500 NW 17 ST. APT 306 | PLANTATION FL 33313 |
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| | | | |
| | | | |

10/10/08

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 contained in Chapter 119, 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:

Marko Popovic
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V.P. POPOVIC MARKO

10/02/07

Date

954-234-3445

Daytime Phone #