

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

99 DEC -9 AM 11:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000099673

1. Corporation Name

QG INVESTMENTS, INC.

Principal Place of Business

Mailing Address

250-110 WAYMONT COURT  
LAKE MARY FL 32746

250-110 WAYMONT COURT  
LAKE MARY FL 32746

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

250-110 WAYMONT COURT  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

250-110 WAYMONT COURT  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

11/30/1998

5. FEI Number

59-3551789

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$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
D	MANJI, MEHBUB	250-110 WAYMONT COURT 110	LAKE MARY FL 32746

000003078270--0  
-12/22/99--01077--008  
\*\*\*750.00 \*\*\*750.00

8. Name and Address of Current Registered Agent

FILINGS, INC.  
3732 N.W. 16TH STREET  
FT. LAUDERDALE FL 33311-4132

9. Name and Address of New Registered Agent

Name MEHBUB MANJI  
Street Address (P.O. Box Number is Not Acceptable)  
250-110 WAYMONT COURT  
Suite, Apt. #, Etc.  
City LAKE MARY State FL Zip Code 32746

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

*[Signature]*

Date 12/3/99

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 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.

KE

SIGNATURE:

*[Signature]* MEHBUB MANJI  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/3/99 4077185630  
Date Daytime Phone #