

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVAL
FILED

04 DEC 14 PM 12:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P99000033583**

1. Corporation Name

Web Textile inc

2. Principal Office Address

2213 Forsyth Rd.

Suite, Apt. #, etc.

E & F

City & State

Orlando Florida

Zip

32807

Country

U.S.A.

3. Mailing Office Address

2721 Forsyth Rd.

Suite, Apt. #, etc.

161

City & State

Winter Park Florida

Zip

32792

Country

U.S.A.

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

April 8, 1999

5. FEI Number

59-3567288

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

Jawed Qayyum

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

2311 Stone Cross Cir

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32828

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

Jawed Qayyum
REGISTERED AGENT MUST SIGN

Date **12-13-04**

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
P	Jawed Qayyum	2311 Stone Cross Cir	Orlando Fl. 32828

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12/14/04--01048--015 **908.75

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:

Jawed Qayyum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-13-04. 407-3830104
Date Daytime Phone #