


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1092

~~CORPORATION~~  
~~REINSTATEMENT~~

 FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 APR 11 PM 12:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000071042

1. Corporation Name

CARS 4 ALL, INC.

2000-2003  
UBR

2. Principal Office Address

922 N. Swindell ave

Suite, Apt. #, etc.

3. Mailing Office Address

922 N. Swindell ave

Suite, Apt. #, etc.

City & State

Lakeland, Florida

City & State

Lakeland, Florida

Zip

33815

Country

USA

Zip

33815

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

8/02/1999

5. FEI Number

593-60-9726

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

Ibrahim Sharawi

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

10326 Steven drive

Suite, Apt. #, Etc.

City

Polk City

State

FL

Zip Code

33868

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



REGISTERED AGENT MUST SIGN

Date 4-4-03

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/D	Ibrahim Sharawi	10326 Steven dr	Polk City, FL 33868

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-03

Date

863-602-0477

Daytime Phone #

CR2E081 (10/02)

**CARS 4 ALL, INC.**



922 N. SWINDELL AVE. ♦ LAKELAND, FLORIDA 33815

Phone 863-802-0477 ♦ Fax 863-802-1888

2 of 2

To Whom It May Concern,

I, Ibrahim Sharawi, did not receive the annual report for 2000. Please waive the reinstatement fees. As this will not happen again.

Thank You,  
Ibrahim Sharawi  
Cars 4 All, Inc.