

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P99000110785

1. Corporation Name

DOLLAR TOWN IMPORT'S INC.

FILED

00 OCT 30 PM 2: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

~~16674 122ND DRIVE NO.~~
~~JUPITER FL 33478~~

9130 S. FEDERAL HWY.
PORT ST. LUCIE, FL 34952

~~16674 122ND DRIVE NO.~~
~~JUPITER FL 33478~~

9130 S. FEDERAL HWY.
PORT ST. LUCIE, FL 34952

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



REINSTATEMENT 00

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

12/27/1999

SP

Suite, Apt. #, etc.

9130 S. FEDERAL HWY.

PORT ST. LUCIE, FLORIDA

Zip

34952

Country

ST. LUCIE

Suite, Apt. #, etc.

9130 S. FEDERAL HWY.

PORT ST. LUCIE, FLORIDA

Zip

34952

Country

ST. LUCIE

5. FEI Number

65-0970096

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D P	ISLAM, A K M ZAHIRUL	16674 122ND DRIVE NO. 9570 AFFIRMED LANE	JUPITER FL 33478 BOCA RATON, FL-33496
S	MAHBUB AH SAN	16674 122ND DRIVE NO.	JUPITER, FL-33478
V	MARIA S. TOOTH	16674 122ND DRIVE NO.	JUPITER, FL-33478
T	REBA ISLAM	9570 AFFIRMED LANE	BOCA RATON, FL-33496
			400003470944--0 -11/20/00--01138--010 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~ISLAM, A K M ZAHIRUL~~
~~16674 122ND DRIVE NO.~~
~~JUPITER FL 33478~~

Name

ISLAM A K M ZAHIRUL

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

9570 AFFIRMED LANE

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33496

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

A K M ZAHIRUL ISLAM

Date 10/25/00

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.

SIGNATURE: A K M ZAHIRUL ISLAM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/00

Date

(561) 398-7014

Daytime Phone #