

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **V23032**

1. Corporation Name

**COMPUEXPORT, CORP.**

03 OCT 14 AM 11:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

2620 N.W. 72 AVENUE  
MIAMI FL 33122  
US

Mailing Address

2620 N.W. 72 AVENUE  
MIAMI FL 33122  
US

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

2618 NW 72 Ave.

Suite, Apt. #, etc.

2618 NW 72 Ave

City & State

MIAMI Florida

City & State

Miami Florida

Zip

33122

Country

USA

Zip

33122

Country

USA

REINSTATEMENT 2003 *Wor*

600023792246  
10/14/03--01059--016 \*\*\*150.00

4. Date Incorporated or Qualified  
To Do Business in Florida

03/19/1992

5. FEI Number

65-0337836

☒ 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	NADER, YAMIL	2620 N.W. 72 STREET	MIAMI FL 33122
SD	NADER, ELIZABETH	2620 N.W. 72 STREET	MIAMI FL 33122
VD	NADER, FARITH	2620 N.W. 72 STREET	MIAMI FL 33122

8. Name and Address of Current Registered Agent

NADER, YAMIL  
2620 N.W. 72 AVENUE  
MIAMI FL 33122

Nader, Yamil  
2618 NW 72 Ave  
Miami, FL 33122

9. Name and Address of New Registered Agent

Name

Nader, Yamil

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

2618 NW 72 Avenue

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33122

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Farith Nader*  
REGISTERED AGENT MUST SIGN

Date 10/10/03

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:

*Farith Nader*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/10/03 305-4778336

Daytime Phone #

CR2E040 (7/03)



2082

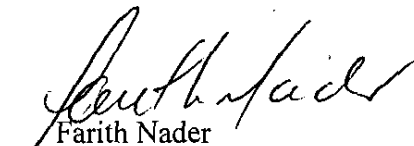
Miami, October 10 2003

Department of State  
Division of Corporations

We just received the Applications for Reinstatement of the division of corporation document Number V23032 the Company name is COMPUEXPORT CORP.  
We never received any other letter in regards of these matter.

If you have any question please let us know at 305-477-8330

Thank's in advance for your help



Farith Nader  
Manager