

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
97498 Sandra B. Mortham
A/R Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V42577

1. Corporation Name
FASCON ENTERPRISES, INC.

Principal Place of Business
2663 E. SUNRISE BLVD., STE. 163
FT. LAUDERDALE FL 33304

Mailing Address
2663 E. SUNRISE BLVD., STE. 163
FT. LAUDERDALE FL 33304

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

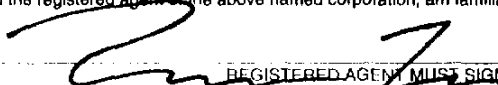
2. New Principal Office Address, If Applicable 1620 N. FED HWY		3. New Mailing Office Address, If Applicable 1620 N. FED HWY		4. Date Incorporated or Qualified To Do Business in Florida 06/10/1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0349716	
City & State FT. LAUDERDALE, FL		City & State FT. LAUDERDALE, FL		Applied For Not Applicable	
Zip 33305	Country USA	Zip 33305	Country USA	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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 (Do NOT Use Post Office Box Numbers)	City / State / Zip
B	TEKE, JUSTIN	2618 NE 11TH CT.	FT. LAUDERDALE FL 33304
P	FARUK TEKE	1620 N. FED. HWY.	FT LAUDERDALE, FL 33305
D	FARUK TEKE	1620 N. FED. HWY.	FT LAUDERDALE, FL 33305
			100002464231--5 -03/20/98--01122--004 ****165.00 ****165.00
			3-20-98

8. Name and Address of Current Registered Agent TEKE, JUSTIN 2618 NE 11TH CT. FT. LAUDERDALE FL 33304		9. Name and Address of New Registered Agent Name FARUK TEKE Street Address (P.O. Box Number is Not Acceptable) 1620 N. FED HWY Suite, Apt. #, Etc. City FT. LAUDERDALE State FL Zip Code 33305	
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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  **REGISTERED AGENT MUST SIGN**

Date **03/20/98** **100002464231--5**
******158.75 ****158.75**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on Intangible tax.)

12. 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:  **1-30-98** **561-995-1070**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

(2)

FASCON ENTERPRISES, INC.
1620 NORTH FEDERAL HIGHWAY
FT. LAUDERDALE, FL 33305

JANUARY 30, 1998

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

RE; FASCON ENTERPRISES, INC.
65-0349716

DEAR SIR OR MADAM;

ENCLOSED PLEASE FIND AN APPLICATION FOR REINSTATEMENT AND THE ORIGINAL FILING OF THE 1998 ANNUAL REPORT FOR FASCON ENTERPRISES INC., ALONG WITH THE RELATED CHECKS FOR THEIR RESPECTIVE FILING FEES. IN PRIOR YEARS WE HAVE SUBMITTED OUR ANNUAL REPORT IN A TIMELY FASHION. THE REPORT FOR 1997 IS DELINQUENT AS A RESULT OF OUR NON RECEIPT OF THE FORMS FROM YOUR OFFICE WHICH IN THE PAST HAS TRIGGERED OUR RESPONSE AND FILING. COMPLICATING THIS MATTER, MY WIFE AND I HAVE HAD TREMENDOUS PERSONAL PROBLEMS IN 1997 WHICH TOOK OUR FOCUS OFF OF MANY OF THE ADMINISTRATIVE RESPONSIBILITIES OF OUR BUSINESS. SPECIFICALLY, MY WIFE BECAME PREGNANT WITH OUR FIRST CHILD IN DECEMBER OF 1996. SHE HAD SEVERE PROBLEMS WITH THIS PREGNANCY THAT REQUIRED HOSPITALIZATION AND CONFINEMENT TO BED AT ALL TIMES WHICH MANDATED MY ASSISTANCE. IN MAY OF 1997, SHE GAVE BIRTH TO OUR SON AFTER ONLY A 5 MONTH PREGNANCY. HE WEIGHED 19 OUNCES, REQUIRED PRENATAL ICU FOR MANY MONTHS, AND FINALLY CAME HOME FROM THE HOSPITAL ON DECEMBER 23, 1997 WHEN HE REACHED A WEIGHT OF 4 POUNDS. HE NOW WEIGHS 10 POUNDS AND IS DOING AMAZINGLY WELL. I HOPE YOU CAN UNDERSTAND THE TRAUMA AND STRESS THAT WE HAVE BEEN THROUGH IN THE PAST YEAR. POSSIBLY, IF WE HAD RECEIVED THE ORIGINAL REPORT, WE WOULD HAVE FILED TIMELY. WE FILE NOW WITH THE HOPE THAT YOU WILL HAVE COMPASSION AND THEREBY ABATE ANY LATE PENALTIES. OUR MEDICAL BILLS EXCEED \$100,000 AND WE DON'T HAVE ALOT OF MONEY.

THANK YOU


FARUK TEKE
PRESIDENT