¥_ =' }	PLEASE READ	ALL INSTR	RUCTI	ONS BEFORE						
	RPORATION ISTATEMENT	Ka Se	atherin ecretary	TMENT OF STATE ne Harris y of State orporations	7)	VISION	TILEU ETARY OF STA TOF CORPORAT T-5 PM12: 1	le Hûne		
	JMENT # F97000 ation Name				ī					
HMH I	Investments, Inc.									
2. Principal Office Address 23800 Ford Road 23800			ice Address		- marco	TAT	empnt (7X - c	9 7.	
Suite, Apt. #, etc. Suite, Apt. #,				Koau		REINSTATEMENT 98-07				
- 74-14	· · · · · · · · · · · · · · · · · · ·		_ .			4. Date Incorporated or Qualified To Do Business in Florida September 19, 1997				
City & State		City & State			· ·	5. FEI Number September 19, 1997 - Applied For				
_Dearb _{Zip}	oorn Hgts., MI Country	Dearbo	ırn Hg	ts., MI Country	38-3372717 Not Applicable				•	
48127	7 U.S.A.	48127		U.S.A.	CERTIFICATE	OF STATUS		Additional F Certificate		
		7. Nam	me and Ar	ddress of Current Registe	ered Agent					
	Name Michael D. Scarf	10		046386	71-	_ 9				
	Street Address (P.O. Box Number is Not Acceptable) 1314 Winter Springs Blvd.					東 東	3/17/01 -010 **1208.75 **	⊍2⊍ **1206	.75	
	Suite, Apt. #, Etc.									
City						State	Zip Code			
mana yang se	Winter Springs					FL	32708			
	appointed the registered agent of the abo	ive named corporati	tion, am fa	miliar with and accept the o	obligations of sectic	n 607.050s	5 or 617.0503, F.S.			
Signature o Registered	of Agent -Michael D. Scarfo	TOOTERED AGEN	NT MUST	CION		Date _	10-1-01			
	s and Street Addresses of Each Officer and		· · · · · · · · · · · · · · · · · · ·		· O disentare)		na – Erick var sammelje parentejnere.	e restrictive and account		
Titles	Name of	<u> </u>	la nonpro-	Street Address of Eac	ch		City / State /	7:_		
	Officers and/or Directors	-	Officer and/or Director			<u> </u>	City / State / 2	Zıp		
Pres/ Dir	Yasser Hammoud		23800 Ford Road, Dearborn Hgts., MI					48127		
/Pres/	-Bassam-Hammoud	22	23800-Ford-Road,			Dearborn-Hgts., MI-48127				
ec/Dir Treas/ Dir	Mostafa Afir	21	26300 Tellegraph			Souti	hfield, MI 480	34		
							Wash	/12-		
							b.			

10. I certify that I am an officer of 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 filling 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 THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR YASSET Harmoud, President

31.3-274-8181

Daytime Phone #