

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

2002 LLC APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

02 NOV 18 AM 10:35

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000014599

Name and Mailing Address

0009046 01 FP 0.352 **PRSR HO 0 0615 32114-611000
 TUDJA & KAIVAL, LLC
 1100 S. RIDGEWOOD AVE.
 DAYTONA BEACH FL 32114-6110

100009045561
 11/18/02--01040--003 **50.00



2. New Mailing Address City, State, Zip		4. State/Country of Formation FL																																	
Principal Place of Business 1100 S. RIDGEWOOD AVE. DAYTONA BEACH FL 32114		5. Date Organized or Qualified To Do Business in Florida 08/28/2001																																	
3. New Principal Place of Business Address City, State, Zip		6. FEI Number 59-3740555	Applied For Not Applicable																																
8. Name and Address of Current Registered Agent PATEL, HARESH M 1100 S. RIDGEWOOD AVE. DAYTONA BEACH FL 32114		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status																																	
9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																			
10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent <u>Hareesh M. Patel</u> Date <u>11-11-02</u> REGISTERED AGENT MUST SIGN																																			
11. Names and Street Addresses of Each Managing Member/Manager <table border="1"> <thead> <tr> <th>Title(s)</th> <th>Name of Managing Members/Managers</th> <th>Street Address of Each Managing Member/Manager</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Pravin. M. Patel</td> <td>1100 S. Ridgewood Av.</td> <td>Daytona Beach FL 32114</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>				Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	Manager	Pravin. M. Patel	1100 S. Ridgewood Av.	Daytona Beach FL 32114																								
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12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager Pravin M. Patel Date 11-15-02 Daytime Phone # 386-255-7000

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TUDJA & KAIVAL. LLC
1100 S. Ridgewood Ave.
Daytona Beach. FL 32114.
November 15, 2002.

To, Division of Corporation
P. O. Box 6321
Tallahassee, Fl 32314

Re: Annual Report
Dear sir/ madam.

This is to inform you that I did not receive my annual report for the corporation's renewal. I received the certificate of Administrative dissolution. I would like to reinstate the corporation & request you to waive the reinstatement fee under the circumstances.

Thank you,

Sincerely



(P.M. PATEL)

Manager.