

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood Secretary of State

DIVISION OF CORPORATIONS

FILED

04 APR 22 AM 7:42

1. DOCUMENT # L02000026305 Name and Mailing Address

0009736 01 AT 0.292 **AUTO T5 3 0615 33687-217676 AAKM, LLC PO BOX 292176 TAMPA FL 33687-2176

SECRETARY OF STATE TALLAHASSEE FLORIDA

MJH

100024179531 10/27/03--01122--010 **150.00



REINSTATEMENT 2003 - 2004

4/22

2. New Mailing Address: 13541 N Florida Ave, Tampa FL 33617. 4. State/Country of Formation: FL. 5. Date Organized or Qualified To Do Business in Florida: 10/07/2002. 6. FEI Number: 11-3660570. 7. CERTIFICATE OF STATUS DESIRED [] \$5.00 Additional Fee required for a Certificate of Status.

8. Name and Address of Current Registered Agent: O'LEARY, D. MICHAEL, 101 E. KENNEDY BLVD., SUITE 2700, TAMPA FL 33602. 9. Name and Address of New Registered Agent.

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: D. Musher. Date: 4/1/04.

Table with 4 columns: Title(s), Name of Managing Members/Managers, Street Address of Each Managing Member/Manager, City / State / Zip. Includes entries for MGR AZIZEH MATAR and MGRM Abdalla Matar.

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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. Signature of Managing Member/Manager: [Signature]. Date: 10/22/03. Daytime Phone #: 813-727-5359.

CR2E014 (7/03)