

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 SEP 29 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L98-1523

1. Limited Liability Company's Name

UNIVERSAL BUSINESS ENTERPRISES AND TECHNOLOGIES LLC
3232 SW 2ND AVE, STE 107
FORT LAUDERDALE, FL 33315

2. Principal Office Address

3232 SW 2ND AVE

Suite, Apt. #, etc.

107

3. Mailing Office Address

3232 SW 2ND AVE

Suite, Apt. #, etc.

107

City & State

FORT LAUDERDALE, FL

City & State

FORT LAUDERDALE, FL

Zip

33315

Country

U.S.A.

Zip

33315

Country

U.S.A.

4. State/Country of Formation

FLORIDA - U.S.A.

**5. Date Organized or Qualified
To Do Business in Florida**

8/20/1998

6. FEI Number

65-0863312

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

HAMID NIAMAT

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

3232 SW 2ND AVE

Suite, Apt. #, Etc.

107

City

FORT LAUDERDALE

State

FL

Zip Code

33315

9. 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

REGISTERED AGENT MUST SIGN

Date 9-26-2000

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	HARUN KHAN	1935 GARDINER LANE D-46	LOUISVILLE, KY
MGRM	AYESHA KHAN	1009 WOODMOUNT DR	NEW ALBANY, IN
MGRM	ISMAIL KHAN	1009 WOODMOUNT DR	NEW ALBANY, IN
MGRM	TAMIM KHAN	1935 GARDINER LANE D-46	LOUISVILLE, KY
MGRM	DIANE PERSAD	94-13 212 TH ST - QUEENS VILLAGE	NEW YORK, NY

11. 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

Date

9/20/00

Daytime Phone #

954 524 9422/3

Typed or printed name of signing Managing Member/Manager

HARUN KHAN