

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 OCT -4 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/11/04

DOCUMENT # L 99000005569

1. Limited Liability Company's Name

GLOBAL TRADELAND, L.L.C.

REINSTATEMENT

2002-2004

2. Principal Office Address

3. Mailing Office Address

Suite, Apt. #, etc.

4639 GULF STAR DR.

Suite, Apt. #, etc.

P.O. BOX 5034

City & State

DESTIN, FL

City & State

DESTIN, FL

Zip

32541

Country

Zip

32540

Country

4. State/Country of Formation

FLORIDA

5. Date Organized or Qualified
To Do Business in Florida

JULY 1, 1999

6. FEI Number

59-3636397

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRE!

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

MUNZER BARGHOUTI

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

4639 GULF STAR DR.

500041329785

09/24/04--01079--001 **250.00

Suite, Apt. #, Etc.

DESTIN, FL

City

State

FL

Zip Code

32541

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

M. Barghouti
REGISTERED AGENT MUST SIGN

Date Sep 10, 2004

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	HILDA ARAFAT	4639 GULF STAR DR.	DESTIN, FL. 32541
MGRM	MUNZER BARGHOUTI	4639 GULF STAR DR.	DESTIN, FL. 32541

REINSTATEMENT

2002-2004

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

M. Barghouti

Date Sep 10, 2004 Daytime Phone # (850) 837-0602

Typed or printed name of signing Managing Member/Manager MUNZER BARGHOUTI

CR2E041 (9/01)