

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

ATX1

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAY 17 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000077900

1. Corporation Name

HAROON ENTERPRISES #101 INC

2. Principal Office Address

3. Mailing Office Address

4799 NW 7TH AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI, FL

Zip

Country

Zip

Country

33127

USA

REINSTATEMENT 03-04

04/14/03 90946 020 \$150.00
05/05/04 80024 012 \$150.00

4. Date Incorporated or Qualified
To Do Business in Florida

8/11/2000

5. FEI Number

65-1032623

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ABDUR R. KHAN

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

4799 NW 7TH AVENUE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33127

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent


REGISTERED AGENT MUST SIGN

Date

05/13/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	ABDUR R. KHAN	4799 NW 7TH AVENUE	MIAMI, FL 33127
SD	MOSHAMED NIRU	4799 NW 7TH AVENUE	MIAMI, FL 33127

10. I certify that I am an officer or 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 filing 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

05/13/04

Daytime Phone #

305-756-3390



TAX HELP

May 13, 2004

ATT: SEAN TONER

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

RE: HAROON ENTERPRISE #101 INC
DOCUMENT #P00000077900

Per our conversation on May 12, 2004, enclosed is a reinstatement application. Please reinstate the above corporation and waive the late fees because the taxpayer did not receive any prior notices.

Thank you,



Spiro Galanis

President

TAX HELP USA INC