	PLEASE READ	ALL INSTRUC	TION	S BEFO	RE C	COMPLET	ING T	THIS FORM.		
CORPORATION REINSTATEMENT		FLORIDA DERA Kathe Secret	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			FILED 02 OCT 21 PM 1: 37				
DOCUMENT # P01000040701 1. Corporation Name MGB ENTERPRISES, INC.						SECRETARY OF STATE TALLAHASSEE, FLORIDA 5000084750459 -10/21/0201036010 *****750.00 *****750.00				
	pal Office Address Martin Luther King							****750.00 ** TEMENT		i.00
City & State Fort	Myers, Florida Country	City & State	City & State Zip Country			5. FEI Number	4. Date Incorporated or Qualified To Do Business in Florida 5. FEI Number Applied For Not Applied by			
3390	001 U.S.					<u></u>	E OF STATU	US DESIRED S8.75 A	Additional Fe Certificate o	ee require of Status
8. ł, being	Name Malek A. Al Street Address (P.O. Box Number is No. 3637 Martin Luth Suite, Apt. #, Etc. City Fort Myers g appointed the registered agent of the above	1 Hindi Not Acceptable) her King B1v	vd.	s of Current Re	4		State FL	Zip Code 33901		
Signature of Registered /	of Malek A. RE	AP Hindi EGISTERED AGENT MUS	ST SIGN	· · · · · · · · · · · · · · · · · · ·	·			10:16:02		
9. Names Titles	s and Street Addresses of Each Officer and Name of	Nor Director (Florida nonp				т				·
	Officers and/or Directors		Street Address of Each Officer and/or Director				<u> </u>	City / State / Zi	,îp	
P/D	Malek A. Al Hindi	_ 363	7 M.	L. Kin	ı j B	slvd.	Ft.	Myers, FL	33901	<u> </u>
V/D	Ibrahim S. Kudsi	363	7 M.	L. Kin	13 B	31vd.	Ft.	Myers, FL	33901	L
T/D	Maher J. Dajani	353	7 M.	L. Kin	ıÿ B	Jivd.	Ft.	Myers, FL	33901	 L
S/D	Jarallah Hindi	353	7 M.	L. Kin	IJ B	lvd.	Ft.	Myers, FL	33901	
]	+									

10. It 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 filling 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 on this application 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 Malek A. Al Hindi

10/16/02 954.491.2700 Date Daylime Phone #