

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 FEB -4 PM 12:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000044806

1. Corporation Name

RAMALLAH TRADING

2. Principal Office Address

4121 NW 132 ST

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

OPA LOCKA

City & State

Zip

FLORIDA

Country

33054

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-1100194

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 03-04

7. Name and Address of Current Registered Agent

Name

ZAAL A. HAZAMA

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

4121 NW 132 STREET

600028173306

02/04/04--01010--006 **300.00

Suite, Apt. #, Etc.

City

OPA LOCKA

State

FL

Zip Code

33054

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 01/20/2004

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
P/DP/S/	ZAAL A. HAZAMA	4121 NW 132 STREET	OPA LOCKA, FL 33054

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/20/2004 305 685-7301

Date

Daytime Phone #

CR2E081 (10/02)

**DIVISION OF CORPORATIONS
ANNUAL REPORT OR REINSTATEMENT
RAMALLAH TRADING, INC.
DOCUMENT # P01000044806**

January 20, 2004

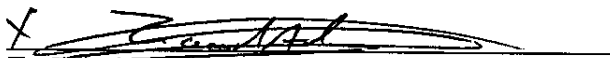
To Whom It May Concern:

I am sending this letter to explain the reason why I did not send to you the form applied for the annual report for the year 2003 because I change my address and I never received the form required.

Our old address was 1001 Colony Pointe Cir # 203 Pembroke Pines, Fl 33026 and the new address is 4121 NW 132 ST OPA Locka, Fl 33054:

If you have any question do not hesitate to contact me at (305) 685-7301

Sincerely,

X 
Zaal A. Hazama
President