PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

DOCUMENT # P01000060794 1. Copporation Name Elbanna Enterprise Eight, Inc. 2. Princetal Office Address 1. Maining Office Address 1807 Saa Pine Lane Suite, Apr. #, etc. City & State Orange Park, Florida Grange Park, Florida Grange Park, Florida Grange Park, Florida 7. Name and Address of Current Registered Agent Name Name of Current Registered Agent Name Address of Current Registered Agent Name Address of Current Registered Agent REGISTERED AGENT Most SIGN 9. Name and Street Address of Each Officer and/or Orector Pronds emprelli corporations must list at least 3 directors) REGISTERED AGENT Most SIGN 9. Name and Street Address of Each Officer and/or Orector Pronds emprelli corporations must list at least 3 directors) REGISTERED AGENT Most SIGN 9. Name and Street Address of Each Officer and/or Orector Pronds emprelli corporations must list at least 3 directors) Titles Officer and/or Orector Transport of Corporation of Corporation and Street Address of Corporation of	1	RPORAT				Jim Secreta	RTMENT O Smith ry of State CORPORATION	_			C-3 PH ETANY GA PLANGEE FI			
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City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & Country	1350 S	S. Walnut S			1807 Se	ea Pine Lane					19315 1042-018 Nill		00.00 02	
Starke, Florida Country 32091 Country USA CERTIFICATE OF STATUS DESIRED Store Address of Each Office of Status Desired	Suite, Apt. #, etc.						f, etc.							
Zip Country USA 32003 Country USA 6. CERTIFICATE OF STATUS DESIRED SET Address of Current Registered Agent 7. Name and Address of Current Registered Agent Name Khalil Elbanna Street Address (P.O. Box Number is Not Acceptable) 8637 Blanding Boulevard Suite Apt. #. Etc. City Jacksonville 8. I. being appointed the registered agent of the above named corporation, are furnish with and accept the obligations of section 607 0505 or 617 0503, F.S. Signature of Registered Agent Registered Agent PL State Sta	-								5. FEI Number Applied For					
Name Khalil Elbanna					1 .			6.				.75 Additional	Fee required	
Street Address (P.O. Box Number is Not Acceptable) State April #, Etc. City JackSonville 8. I, being appointed the registered agent of the above named corporation, are familiar with and accept the obligations of section 807.0505 or 617.0503, P.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Officers and/or Directors Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Officers and/or Directors Officers and/or Directors Associated Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Officers and/or Director Director (Plorida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Officers and/or Director (Plorida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Officers and/or Director (Plorida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Off					7.	Name and	Address of Cur	rent Registere	d Agent					
Name of Officers and/or Directors Street Address of Each Officer and/or Director City / State / Zip D/P/S Khalil Elbanna 8637 Blanding Boulevard Jacksonville, Florida 32244 Jacksonville, Florida 32244 O. 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 of	Suite, Apt. City Jac appointed the	#. Etc. ksonvil	le Lagent of the abov	e named corp	oration, and	amiliar with and		igations of seci	FL	322 or 617.0503, F.S		CR2E081 (9/01)	
Officers and/or Directors Officer and/or Director Officer and/or Dire	9. Names	and Street Add	dresses o	Each Officer and	or Director (FI	orida nonpro	fit corporations	must list at leas	st 3 directors)					
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