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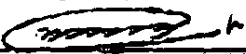
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>P01600070164</u>					
1. Corporation Name <u>BABUL TECHNOLOGIES, INC.</u>					
2. Principal Office Address <u>301 North Clematis St</u>			3. Mailing Office Address <u>301 North Clematis St</u>		
Suite, Apt. #, etc. <u>SUITE 3000</u>			Suite, Apt. #, etc. <u>SUITE 3000</u>		
City & State <u>West Palm Beach, FL</u>			City & State <u>West Palm Beach</u>		
Zip <u>33410</u>		Country <u>US</u>		Zip <u>33410</u>	
Country <u>US</u>					
4. Have incorporated or qualified To Do Business in Florida <u>7/16/01</u>					
5. FEI Number <u>94-3349175</u>				Applied For (Not Applicable)	
6. CERTIFICATE OF STATUS DESIRED ☐					
7. Name and Address of Current Registered Agent					
Name <u>MUKESH MASITHIA</u>					
Street Address (P.O. Box Number is Not Acceptable) <u>301 North Clematis St</u>					
Suite, Apt. #, etc. <u>SUITE 3000</u>					
City <u>West Palm Beach</u>					
State <u>FL</u>		Zip Code <u>33410</u>			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0605, F.S.					
Signature of Registered Agent				Date <u>03/11/2003</u>	
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida non-profit corporations must list at least 3 directors)					
TIPOU	Name of Officer and/or Director	Street Address of Each Officer and/or Director		City / State / Zip	
Pres	MUKESH MASITHIA	301 North Clematis St.		West Palm Beach FL 33410	
Clerk	MUKESH MASITHIA	301 North Clematis St		West Palm Beach, FL 33410	
Treas	MUKESH MASITHIA	301 North Clematis St		West Palm Beach FL 33410	
Direct	MUKESH MASITHIA	301 North Clematis St		West Palm Beach, FL 33410	
10. I hereby declare as an officer or director or the incorporator or filer 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 taxes within the requirements of sections 607.0605 or 617.0605, F.S., that are owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.37(3)(g), F.S. The information indicated on the application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE:				Date <u>03/11/2003</u> 561-828-8255	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CURRENT FILING