PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2 60

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 2006 AUG -9 PH 12: 14
DOCUMENT # PO1000095288		SECRETAN LOGISTATE TALLAHASSEE, FLORIDA
H.A.K. & h., Inc.		`
	1	
2. Principal Office Address 3117 N. MyHE Ave. Suite, Apt. #. etc.	3. Mailing Office Address 317 N. MYTHE AVE Suite, Apt. #, etc.	CR2E081 (12/05)
Julia, Apt. #, etc.	Suite, Apr. #, etc.	4. Date incorporated or Qualified To Do Business in Florida
City & State LACKSONILE, FL	City & State JACKSONVILLE, FL.	5. FEI Number Applied For Not Applicable
32209 Country	2ip Country 33209	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL 32217		
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 Should mo hours Date 8/7/06		
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 Eacl Officer and/or Directo	
D Khalid Mohan	ned JAN FL. 3226	ane 9 Jax. FL 32209
D KAMAL Horat	im Stockbridge GA	1 30281 Stockbridge, GA 30281
		13 8 10/De
		1 700072619447 08/1/06-01008-006 **750.00
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 contained in Chapter 119, 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:		
SIGNATURE: 51 VI 6 6 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #		

SIMPLIFIED BOOKKEEPING AND TAX SERVICE, INC.

5917 Beach Boulevard, Jacksonville, Florida 32207

Fred Isaac, Tax Consultant, (904) 730-9264 Fax (904) 371-3969



Bookkeeping - Payrolls - Notary - Accounts Invited "It's Good Business to Keep Good Records"

August 7, 2006

Re:

HAK&K

3117 N. Myrtle Ave. Jacksonville, FL 32209

To Whom It May Concern:

Per Conversation

Our firm, Simplified Bookkeeping, does the accounting for HAK & K and we did not receive any information regarding the reinstatement for the corporation. If you could please waived the penalties and late fees we would greatly appreciate it. If you need any additional information please don't hesitate to contact our office at (904) 730-9264.

Sincerely,

Brett Isaac

CPA