

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 SEP 28 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P020005701

1. Corporation Name

Attila Holdings, Inc

2. Principal Office Address

9200 NW 14th COURT

Suite, Apt. #, etc.

City & State

PLANTATION, FL.

Zip

33322

Country

USA

3. Mailing Office Address

115 INTERSTATE PARK

Suite, Apt. #, etc.

City & State

SPARTANBURG, SC

Zip

29303

Country

USA

REINSTATEMENT 03-05

4. Date Incorporated or Qualified To Do Business in Florida

5/16/02

5. FEI Number

03-0446025

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Gary Kabot

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

9200 NW 14th COURT

Suite, Apt. #, Etc.

400060127814

10/03/05-01005-007 **1058 75

City

PLANTATION

State

FL

Zip Code

33322

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

Gary Kabot

REGISTERED AGENT MUST SIGN

Date

Sept 26, 2005

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.T. D	Gary Kabot	9200 NW 14th COURT	PLANTATION, FL 33322
D	Brian Kabot	650 MADISON AVE. 26th floor	NEW YORK, NY 10022
S.D	John Box	11925 SAM RIDGER DRIVE, SITE A	CHARLOTTE, NC 28269
		<i>JB 9/28</i>	

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:

Gary Kabot (Gary Kabot - President & Director)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Sept 26, 2005 954-261-4353

Daytime Phone #

CR2E081 (01/05)