

ATTACHMENT A.

PS 182

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONSFILED
CLERK OF STATE
DIVISION OF CORPORATIONS

04 MAY 12 AM 9:19

DOCUMENT # P02000099212

1. Corporation Name

RAZA BROTHERS, INC.

2. Principal Office Address

7210 PIONEER LAKES CIRCLE

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

Zip

33413

Country

USA

3. Mailing Office Address

7210 PIONEER LAKES CIRCLE

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

Zip

33413

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida 9/13/02

5. FEI Number

61-1425004

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

SHAHID R. SIDDIQUI

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

7210 PIONEER LAKES CIRCLE

Suite, Apt. #, Etc.

City

WEST PALM BEACH

State -
FLZip Code
33413

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

X

REGISTERED AGENT MUST SIGN

Date

X 4/22/04

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	KAMRAN SIDDIQUI	1415 BETHPAGE WAY	WPB, FL 33413
VP	SHAHID R SIDDIQUI	1415 BETHPAGE WAY	WPB, FL 33413

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

- SHAHID R. SIDDIQUI

Date

X 4/22/04

561-649-7742

Daytime Phone #

CR20081 (01/04)

PJ 2 32

RAZA BROTHERS, INC.
7210 PIONEER LAKES CIRCLE
WEST PALM BEACH, FLORIDA 33413
PH / FAX: (561) 649-7742

May 6, 2004

ATTN: MS. TINA ROBERTS
REINSTATEMENTS, Division of Corporations

RE: Reinstatement Penalty Waiver for RAZA BROTHERS, INC.
Document # P02000099212

Dear Ms. Roberts:

First of all, we apologize for interrupting your lunch with our phone call earlier today.

We also ask that you please accept the attached Reinstatement Application for **RAZA BROTHERS, INC., Document # P02000099212** (see ATTACHMENT A), and waive any penalty.

We originally filed our 2003 Uniform Business Report (UBR) along with a check for \$150.00 in February of 2003. When the check was cashed on February 20, 2003 (see ATTACHMENT B), we assumed that our filing had been accepted.

We never received the State's rejection notice of our 2003 UBR dated February 21, 2003 and, therefore, could not respond to it.

We only recently discovered that our 2003 UBR had been rejected when we tried to file our 2004 UBR online.

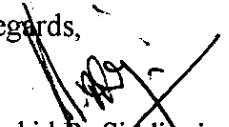
Because we filed and paid in a timely manner and did not receive your rejection notice in 2003, we ask that you accept the attached Reinstatement Application without penalty.

We have already sent checks totaling \$308.75 to the State, comprised of \$150.00 for the year 2003 UBR, \$150.00 for the year 2004 UBR and \$8.75 for a Certificate of Status.

Please send the Certificate of Status to us at the address above.

Thank you for your assistance, Miss Roberts.

Regards,


Shahid R. Siddiqui
Registered Agent