FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JAN 26 AM 9:35

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000123746

REINSTATEMENT 05-06

CR2E081 (8/06)

1. Corporation Name
BHA-KU, INC.

2. Principal Office Address	3. Mailing Office Address
10400 NW 33RD ST	10400 NW 33RD ST
Suite, Apt. #, etc.: 120	Suite, Apt. #, etc.: 120
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33172 Country: USA	Zip: 33172 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/20/2002

5. FEI Number: 460512880 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $30.00 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Brent G. Wolmer, Esq.

Street Address (P.O. Box Number is Not Acceptable): 712 U.S. Highway One

Suite, Apt. #, Etc.: 4th Floor

City: North Palm Beach | State: FL | Zip Code: 33408

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: B.G. Wolmer Date: 1/26/06

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	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	ELIEZER TABIB	10400 NW 33RD ST, #120	MIAMI, FL 33172
VP	DROR LEVY	10400 NW 33RD ST.#120	MIMIA, FL 33172
T	DROR LEVY	10400 NW 33RD ST. #120	MIAMI, FL 33172
S	DROR LEVY	10400 NW 33RD ST, #120	MIAMI, FL 33172

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: B.G. Wolmer, attorney in fact 1/26/06 561-844-3600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Brent G. Wolmer — Date — Daytime Phone #

Florida Department of State

Division of Corporations
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CORPORATION REINSTATEMENT

BHA-KU, INC.

Certificate of Status	1
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