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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 06 DEC 11 AM 9:89
DOCUMENT # P93000	024411	SECNETARY OF STATE TABLAHASSEE, PLURIDA
SAMIR KNTER	orises Inc	
2. Principal Office Address 2172 WHSPER LAKES BLVN Suite, Apt. 4, etc.	3. Mailing Office Address 9239 Pecky CYPRES Was Suite. Apl. #. etc.	REINSTARPERE
	Oscaración	4. Date incorporated or Qualified To Do Business in Florida 63/93
ORLANDO, FLORIDA	ORLANDO FLORIDA	5. FEI Number Applied For Not Applied For
to country 32837 USA	32836 USA	CERTIFICATE OF STATUS DESIRED \$575 Additional heart-quired for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name		
Suite, Apt. #, Etc.		
CHORLANDO		State Zp Code FL 32836
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 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	
P MIKARIM BRAHIM 9239 KUKY (YPRESS WAY ORLANDO, FLORION, 39884		
I TAZIM TERAHIM 2239 PRILYCYPRES WAY ORIANDO, FLORIDOSSEZ		
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 raines of individuals tisted on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and acculate, and my signature shall have the same legal effect as if made under oath.		
SIGNATURE: 51/30/06 407-856-6455 BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #		

SAMIR ENRERPRISES INC. Dba Whisper Lake Cleaners 2172 Whisper Lakes Blvd, Orl. Fl. 32837

Nov 30th 2006

Dept. of State
Division of Corporations
P.O.Box 6327
Tallahassee, Fl. 32314

RE: Reinstatement of Corporation Document #P93000024411 FEI 593173798

Dear Sir/Madam,

The purpose of this letters is to give you an explanation in order to have the reinstatement fee waived.

The Corporation filing form was not received. On December 01, 2004, we moved residence from 8930 Angelica Drive (previous mailing address) to 9239 Pecky Cypress way, Orlando, Florida. 32836. The postal service was supposed to redirect all mail to the "new mailing address". Looks like that did not happen and hence the dissolution of the corporation. We did not receive any Notice of Dissolution either.

I am attaching a cheque for \$300.00 for 2005 and 2006 filing.

Please forward all future correspondence and forms to 9239 Pecky Cypress Way. Orlando, Fl. 32836.

Thank you for your understanding.

Alkarim Ibrahim President

Phone: 407 856 6455 Bus.

407 782 8453 Cell