

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P 9500000 1328			
1. Corporation Name JUBARCO, INC			
2. Principal Office Address 5345 W. IRLO BRONSON HWY		3. Mailing Office Address 7345 SAND LAKE RD.	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 412	
City & State KISSIMMEE, FLORIDA		City & State ORLANDO, FLORIDA	
Zip 34746	Country OSCEDA	Zip 32819	Country ORANGE
4. Date Incorporated or Qualified To Do Business in Florida 11/4/1995		5. FEI Number 59-3287822	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent Name: BASSAM ABU-JUBARA Street Address (P.O. Box Number is Not Acceptable): 5345 W. IRLO BRONSON HWY. Suite, Apt. #, Etc.: City: KISSIMMEE, FL State: FL Zip Code: 34746			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0503, F.S. Signature of Registered Agent: [Signature] Date: 10/25/01 REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	BASSAM ABU-JUBARA	4608 ENGLE PEAK DR.	KISSIMMEE, FL. 34746
VP/D	KHALIL ABU-JUBARA	4620 EAGLE PEAK DR	KISSIMMEE, FL. 34746
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: [Signature]		BASSAM ABU-JUBARA 10/25/01 407-397-4433	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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CR2001 (9/00)

Jubarco, Inc.
5345 W. Irlo Bronson Hwy
Kissimmee, Florida 34746
Tel. # 407-3974433

November 26, 2001

Florida Dept. of State
Division of Corporation
409 East Gains Street
Tallahassee, Florida 32399

Re: Document Number **P95000001328**

To whom it may concern;

In the course of a business transaction, it has come to our attention that Jubarco Inc. has been administratively dissolve as of as of September 22, 2000. As it was explained by your office via telephone yesterday that the reason for dissolution of the corporation was due to non filing of the annual reports for the years 2000 and 2001.

When our company incorporated in January of 1995, we used the registered agent's personal address as our mailing address for the corporation. This was done to secure that all the important correspondences will be received and taken care of accordingly. Unfortunately, this was not case. In June of 1999 his personal address changed to 4608 Eagle Peak Drive, Kissimmee, Florida. I can't understand why we didn't received any of your correspondence, since the Post Office was transferring mail up until November of 1999 from that address. As you will notice based on your records, we always file on time. We have enclosed signed corporation annual report reflecting the changes in the principal office and mailing address. We are requesting waiver of reinstatement fees. Also enclosed is a check for \$300.00 for the annual fees for the years 2000 and 2001.

Your attention in this matter would be greatly appreciated.

Sincerely yours,

Bassam Abu-Jubara.