SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

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	PROFIT	FLORIDA DEPA	RTMENT OF STATE	hand if have had
	RPORATION (A)	Sandra B	I. Mortham	
	JAL REPORT	33 7	ry of State	
	1998	DIVISION OF	CORPORATIONS	98 AUG 24 PM 3: 12
DOCUMENT # P9700006334 (1) KARAMBA INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA
NANAMO	DA ING.			
Principal Plac	e of Business	Mailing Address		
700 N MAIN STREET 700 N MAIN STREET				
KISSIMMEE FL		KISSIMMEE FL 34744		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				01/21/1997
Principal Place of Business 28. Malling Address				4. FEI Number 3432660 Applied For
Suite, Apt.	# ata	Suite, Apt. #, etc.		
22	#, BIÇ.	27		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Cempaign Financing \$5.00 May Be
23		28	1 0	Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre		1301	10. Name and Address of New Registered Agent
	TER, BERNARD R		81 Name	
	B BIG SKY BLVD.		82 Street Add	ress (P.O. Box Number is Not Acceptable)
KISS	SIMMEE FL 34741		83	
			84 City	FL 85 Zip Code
11. Pursuant	t to the provisions of sections 607.050	2 and 607.1508, Florida Statute	s, the above-named corpo	ration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
agent. I s	am familiar with, and accept the oblig	otions of postion 607 0505 Ele	idilibilized by the corporati	
		adons of, section 607.0505, Fic	orida Statutes.	,
SIGNATURE	Signature, typod or printed name of registered age		orida Statutes. OTE: Registered Agent signature reg	
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN		OTE: Registered Agent signature req	
12. TITLE	Signature, typod or printed name of registered age OFFICERS AN	nt and title if applicable. [NC	DTE: Registered Agent signature req	ulred when reinstating) DATE
12. TITLE NAME	Signature, typod or printed name of registered age OFFICERS AN PVST NOORMOHAMED, NASIM	nt and title if applicable. (NC	TE: Registered Agent signature req 13. 1.1 TITLE 1.2 NAME	outred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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Attn; Leslie Sellers Division of Corporations Annual Reports Filings P. O. Box 1500 Tallahassee FL 32302-1500

KARAMBA INC. 700 N. Main St Kissimmee FL 34744 July 29th 1998

Dear Madam,

I enclose my Document of Corporation name # P97000006334 for your kind attention. (Check enclosed # 1100)

The original form was lost in mail and I had to cancel the first cheek - proof of cancellation was nailed in a Separate envelope, bût copy is enclosed again!

Please accept my apologies and & appreciate your cooperation in this matter.

your sincerely, New Not 1

NASIM NOORMOHAMED PRESIDENT, CEO