PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.





FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT	#	P98000009902
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Corporation Name

GJM BAGEL ENTERPRISES, INC.

2. Principal Office Address 10048 W. McNab Road		3. Malling Office Address 10048 W. McNab Road	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Tamarac		City & State - Tamarac, Floridão : 120 - 1	
Zip 33321	Country	Zip 33321	Country Broward

4. Date Incorporated or Qualified To Do Business in Florida 1/30/1998 5. FEI Number Applied For 65-0813605 Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

	7. Name and Address of Current Regis	
Name	Michael J. Salomone	05/14/03==01039==025 ***8. 5
Street A	Address (P.O. Box Number is Not Acceptable) 7880 W. Oakland Park Blvd.,	
Suite, A	Apt.#,Etc. Suite 300	
City	Sunrise	State Zip Code FL 33351
R I being appointed	the registered agent of the above period cornoration am familiar with and accept the	a chilipations of section 607 0605 or 617 0603. E. C.

8. I, being appointed the registered agent of the above pames corporation, am familiar with and accept the obligations of secti	on 607.0505 or 617.0503, F.S.
Signature of Registered Agent Agent Agent MUST SIGN	
signature of / / / / / / / / / / / / / / / / / /	_
Registered Agent ////////////////////////////////////	Date
THE STEPPED AGENT MUST SIGN	

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Street Address of Each Titles City / State / Zip Officers and/or Directors Officer and/or Director 33321 РD -Gary Fosburg 8717 NW 61st Street Tamarac, Florida 100018938991 05/14/03--01039--026 **300.00

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 filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2092

LAW OFFICES MICHAEL J. SALOMONE, P.A.

SECURITY BANK BUILDING
THIRD FLOOR, SUITE 300
7880 WEST OAKLAND PARK BOULEVARD
SUNRISE, FLORIDA 33351
954-748-5200
TELECOPIER 954-748-9907

ESTATE PLANNING, WILLS,
TRUSTS AND ADMINISTRATION
REAL PROPERTY LAW

April 28, 2003

Department of State Division of Corporations 409 East Gains Street Tallahassee, Florida 32399

Re: GJM Bagel Enterprises, Inc., a dissolved corporation

Doc. #: P98000009902

To whom it may concern:

I represent the above corporation. Enclosed please find an application for corporate reinstatement along with a check for \$300.00 to cover the annual report fee for the years 2002 and 2003. The reinstatement fee is not included, and this is to request that it be waived for the following reason:

The address of the corporation was set forth at 7770 W. Oakland Park Blvd., Sunrise, Florida -33351. This was the office where I previously maintained my. I had moved out of that address when the annual report for the years 2002 and 2003 were mailed and they were never received.

This is to request that the above corporation be reinstated without payment of reinstatement fee.

Xualus I

HAEL SALOMONE

Dno.