

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
06 MAR 27 AM 8:44  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000053021

1. Corporation Name

RAHIM ENTERPRISES, INC.

2. Principal Office Address

2160 Americana Blvd.

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA.

Zip

32839

Country

USA

3. Mailing Office Address

2160 AMERICANA BLVD.

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

Zip

32839

Country

USA

REINSTATEMENT 01-06  
CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

06/11/1999

5. FEI Number

59-3580637

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$3.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RAMZAN. GULAMALI

Street Address (P.O. Box Number is Not Acceptable)

2160 AMERICANA BLVD.

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32839

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

Date 3-8-06

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
PTD	RAMZAN GULAMALI	8841 CYPRESS RESERVE CIR.	ORLANDO, FL, 32836
SVD	AMIN GULAMALI	4680 S. OBT.	ORLANDO, FL, 32839
D	ABDULACI GULAMALI	4680 S. OBT.	ORLANDO, FL, 32839
			200069836212 04/05/06--01043--007 **908.75

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 contained in Chapter 119, 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

3-8-06

Date

407 852-1112

Daytime Phone #

3-22-06

To:- FLORIDA DEPT. OF STATE

SECRETARY OF STATE

DIVISION OF CORPORATION.

— CORPORATION REINSTATEMENT —

" RAHIM ENTERPRISES INC "

Doc # P 99 00 00 53021.

Attm:- DEBRA. S. COOPER.

DOCUMENT SPECIALIST.

This letter is to inform that the above corporation renewals have never been since the year 2001.

We would kindly request you to please waive the reinstatement fee. Any questions please call me

at (321) 231-3995

\* Our new address.

RAHIM ENT. INC.

2160 Americana Blvd.

Orlando, FL 32839

Thanks.  


RAMZAN GULAMALI

(RAHIM ENT. INC.)