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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT#

P99000077856

FILED

02 NOV -5 AM 8: 46

SECRETARY OF STATE TALLAHASSEE. FLORIDA

1. Corporation Name				
TAN	extile, Inc			
		HEMSTATEWENT 01-02		
2. Principal Office Address 13324 Kity Fort	R. 13324 KIHY JOY			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	*****300 00 *****300 00		
City & State	0.00	4. Date Incorporated or Qualified To Do Business in Florida October 99		
OrlandoitL	Orlando, FL 378	5. FEI Number 59-3597139 Applied For Not Applicable		
zip 32828 Country USA	2ip 32828 Country USA	6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status		
	7. Name and Address of Current I	Registered Agent		
Name Naee	200008387042 11/06/0201133011 **500.00			
Street Address (P.O. Box Number is	itty fork Rd			
Suite, Apt. #, Etc. 20008387042 11/06/0201133012 **100.100				
city Orlando		State Zip Code 8-28		
8. I, being appointed the registered agent of the a	bove named corporation, am familiar with and according	ept the obligations of section 607.0505 or 617.0503, F.S.		
Negistered Agent	cm Ahmed Kapam	Ahand Date 09/01/02		

9. Names	and Street Addresses of Each Officer and/or Director (F	lorida 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			
CEO	Nacem Ahmed	13324 Kitly fork Rd	Orlando, FL 32828			
<u> </u>						
		25	 0008387042 02-01133013-**8.75 			
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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.

SIG	NAT	'HR	F٠
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Nacem Ahmed SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / 0/22

13324 KITTY FORK RD ORLANDO, FL 32828 (407) 282 7705 (407) 282 2517 FAX natextileinc@aol.com

July 25, 2002

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State P. O. Box 6327 Tallahassee, FL 32314

RE: Document # P99000077856, FEI # 593597139

Dear Madam:

I am writing this letter to inform you that we moved last year and we have new address. Our company didn't receive any letter from Florida State. I found out today from my accountant after he visited www.sunbiz.org that our company's status is inactive. Enclosed is a check of \$300 for 2001 and 2002.

Thanks for your co-operation and understanding.

Sincerely,

Naeem Ahmed President

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