## PLEASE READ ALL INSTRUCTIONS REFORE COMPLETING THIS FORM

| V                                      | PLEASE READ  | ALL INSTRUC   | TIONS BEFORE  | COMPLETI   | NG THÍS   | FÓRM.                |                               |  |
|--|--|---|---|--|---|----------------------|-------------------------------|--|
| REINSTATEMENT                          |  |   | A DEPARTMENT OF STATE Secretary of State vision of corporations                                       |  | 03 AUG 15 AM 9:54<br>SECRETARY OF STATE<br>TALLAHASSEE, FLORIDA   |                      |                               |  |
| 1. Corpora                             | UMENT # V73978 ation Name B DELIVERY SERVICE   | , INC   |   |  |   |                      |                               |  |
| <b>3</b> '                             |  |   | Office Address CLEARY BLVD  |  |   |                      |                               |  |
| Suite, Apt. #<br>APT 1<br>City & State | 111  | APT 111 City & State  |   | 4. Date Incorporated or Qualified To Do Business in Florida 10/22/1992 |   |                      |                               |  |
| PLANTATION, FL Zip Country             |  | PLANTATION, FL Zip Country  |   | 65-036   | 5. FEI Number Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIDED 1 \$8.75 Additional Fee require |                      |                               |  |
| 33324                                  | USA  | 33324   | USA   | CERTIFICATE  | OF STATUS DESI  | RED for a Cer        | tificate of Status            |  |
| 8. i. being                            | Street Address (P.O. Box Number is N  Suite, Apt. #, Etc.  APT 111  City PLANTATION  appointed the registered agent of the abo   |   | State Zip 6   | 23568<br>U73003<br>Code<br>324   | <del>3</del> 2<br>**150.00  |                      |                               |  |
|  | 1<br>Agent <u>Behred Bak</u><br>RE   | •   | •   |  |   | 08/03                |                               |  |
| 9. Names                               | and Street Addresses of Each Officer and   | Vor Director (Florida nonp  | rofit corporations must list at le  | east 3 directors)  |   |                      |                               |  |
| Titles                                 | Name of<br>Officers and/or Directors   |   | Street Address of Each<br>Officer and/or Director   |  | City / State / Zip  |                      |                               |  |
| P,V,S,T                                | BEHZAD BABAPOUR  | 10733   | 10733 CLARY BLVD #111   |  | PLANTATION, FL 33324  |                      |                               |  |
| ,                                      |  |   |   |  |   |                      |                               |  |
| this rein<br>owed by                   | r that I am an officer or director or the receinstatement application, the reason for dissipation have been paid and the lapplication is true and accurate, and my signature:    Deligible   Deligible | olution has been eliminate<br>names of individuals listed<br>gnature shall have the sar | d, the corporate name satisfies<br>on this form do not qualify for<br>ne legal effect as if made unde | s the requirements o<br>an exemption under<br>or oath.                 | f section 607.04  | 01 or 617,0401, F.S. | that all fees ation indicated |  |

g 8/18

## B & B DELIVERY SERVICE, INC 10733 CLEARY BLVD # 111 PLANTATION, FLORIDA 33324

Phone (954) 812-8906

August 8, 2003

Florida Department of State
Division of Corporations
Reinstatement Section
409 East Gaines Street
Tallahassee, Florida 32399

In RE: 2003 Corporate Reinstatement filing Uniform Business Report Document V73978

I met with my accountant today and he found that I had not renewed my Uniform Business Report for 2003. Please be advised that I never received the annual report form application.

Please find enclosed a check in the amount of \$ 150.00 for the above year.

Due to the circumstances above, I hereby request that you abate any penalties you may impose.

Sincerely Yours;

Behrad Babapour Behrad Babapour Company President