

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

02 NOV 27 PM 3:15

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P01000092559

1. Corporation Name

SATGURU INC.

Principal Place of Business Mailing Address
~~11000 SW 77TH TERR~~ 11903 SW 77TH TERR
~~MIAMI FL 33183~~ MIAMI FL 33183
 10200 NW 25TH STREET
 SUITE 210
 MIAMI FL 33172
 If above addresses are incorrect in any way, line through incorrect information and enter correction below.



600009240546
 11/27/02--01054--015 **150.00

2. New Principal Office Address, if Applicable 10200 NW 25TH STREET Suite, Apt. #, etc. #210		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida 09/16/2001	
City & State Miami FL		City & State		5. FEI Number 65-1143281	
Zip 33172		Country USA		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	NEETU DADLANI	11903 SW 77TH TERR	MIAMI FL 33183

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
DADLANI, NEETU 11903 SW 77TH TERR MIAMI FL 33183		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent Neetu Dadlani REGISTERED AGENT MUST SIGN
 Date 11-21-02

11. 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 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: Sheela D. S. S. S. REGISTERED AGENT MUST SIGN
 Date 11-21-02

CR2E040 (8/02)

November 13, 2002

To: Florida Department of State
Re: Satguru, Inc
Document # P01000092559

Request for waiver of reinstatement fee

To Whom It May Concern:

We are requesting a waiver of the reinstatement fee as we did not receive the prior two Uniform Business Report notices.

Enclosed is the completed application for reinstatement, the \$150 fee and the letter.

Thank you,



Neetu Dadlani,
President