PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM



CORPORATION	
CHILD THE THURSD	į



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F01000002498

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63 MAY 29 AM 11: 15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

					1		
2. Principal Office Address 1330 WEST AVE			3. Mailing Office Address 1521 ALTON ROAD		2002-2003 UBF		
Suite, Apt. #, etc. '210 Y		Suite, Apt. #, etc. 159		4. Date Incorporated or To Do Business in Flo	Out the state of	8/01	
City & State Miami Beach, FL		City & State MIAMI BEACH, FL		5. FEI Number / 3 -	4136155	Applied For Not Applicable	
²¹⁰ 33 /	139	Country USA	zig 33139	Country	6. CERTIFICATE OF STATU	US DESIRED X \$8.75 Addition a Cer	
			7. Name and	Address of Current Regists	red Agent		
į	Name SERGEI NIKOLAEV				200 06/03/03	0204263 01069014	1 6.2 ***3 78, 75
Street Address (P.O. Box Number is Not Acceptable) 13 30 West Ave.,							
ì	Suite, Apt. #, Etc. 210 Y						
	City	Miani B	EACH		State FL	^{Zip Code} 33/34	7

8. I, being appointed the registered egent 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								
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					
P/s	SERGEI NIFOLAEV	1330 West Ave., Ap. 2104	Miani Beach, FL 33139					

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:

SEPSET NIKOLAEV
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/30/03

5305-604-2017

Date

Daytime Phone #

CR2E081 (10/02)



Lanis Inc. D.B.A. Lanis Group 1521 Alton Road , Unit 159 Miami Beach , FL 33139 Tel. 305-604-2017 , Fax. 305-604-3207

To: Department of State - Division of Corporation

Date: May 30, 2003

This tetter is ti inform you that I did not receive any mail from your Department . And I know that you didn't get it back.

I did move to Miami , Florida after September 11 , 2001 and did forward all mail from 40 Rector Street , Suite 1504 , New York , NY 10006 to 1521 Alton Road , # 159 , Miami Beach , FL 33139 on December 3 , 2001.

I didn't make any mistakes in addresses .

USPS is investigating this matter right now . Case # C09066008

Best Regards

Sergei Nikolaev

President