PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLIGATION
FOR
REINSTATEMEN



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9800005718

1. Corporation Name

PEOPLE3, INC.

Mailing Address

745 ROUTE 202/206 BRIDGEWATER NJ 08807

Signature of Registered Agent

Principal Place of Business

GARTNER.INC 56 TOP GALLANT RD STANFORD CT 06904 APPHO EL AND FILED

03 HAY 20 PH 3: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA



If above addresses are incorrect in any way, line through incorrect information and enter correction below.							DECINADO DE O EDOCEDO O OSTA DE COMPANSA D				
New Principal Office Address, If Applicable			New Mailing Office Address, If Applicable				Date Incorporated or Qualified To Do Business in Florida 10/13/1998				
/Suite, Apt. #, etc. Suite			ite, Apt. #, etc.				5. FEI Number			Applied Fo	
City & State			City & State				1	22-3609913 Applied 1			
Zip	Country	Zip	-		Country	<u></u>	6. CERTIFICATE	OF STATUS DESIRE	\$8.75 / for a	Additional Fee req Certificate of Stat	uired tus
7. Names a	and Street Addresses of Ea	ch Officer and/or Dire	ctor (Flor	rida nonprofi	t corpora	tions must list at lea	ast 3 directors)				
Title(s) ∕1	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				4	City / State	/ Zip	
PD	PHTENGER, LINDA Maureen O'Connell			745 ROUTE 2021/206 56 TOP GALLANT ROAD				BRIDGEWATER グアルブ	NJ 08807 NFORD;	CT-0691	04
S	LEWIS G. Schwartz			745 ROUTE 202/206 56 70P GOMANT ROAD				BRIDGEWATER	NJ 08807 (OR'D)	CT 0692	74
T	Christopher latend			745 ROUTE 202/206 56 TOP ENLANTRO				BRIDGEWATER & TRIM	NJ 08807	CT 069	04
958 95	JUDITH E. 131DRD			745 ROUTE 202/206 56 70P GALANT RON			UT ROAD	BRIDGEWATER	NJ 08807 ORI) J	CT 069	104
		1/									
							200	001957	'552 <i>:</i>	2	
Name and Address of Current Registered Agent					Name and Address of New Registered Agent						
C T CORPORATION SYSTEM					Name 65	E G	Corp	BRATOC	N Service	æ	
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324						Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.					any
			<u> </u>			City Talla	ha 350	ee	State Z	3230	\overline{L}
10. I, being	appointed the registered a	gent of the above nam	ned corpo	ration, am fa	ımiliar wit	h and accept the ol	bligations of Secti	on 607.0505, F.S. o	r 617.0505, F	s. /	

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.

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 furtifier certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 of 617,0401, F.S., that all fees

Brian Courtney

REGISTERED AGENT MUST SIGN

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE

secretary :5/19

Daytime Phone # 30



ACCOUNT NO. : 072100000032

1098342 7330872

ORDER DATE: May 19, 2003

ORDER TIME : 10:06 AM

ORDER NO. : 098342-005

CUSTOMER NO: 7330872

CUSTOMER: Ms. Judith E. Isidro

Gartner, Inc.

56 Top Gallant Road

Po Box 10212

Stamford, CT 06904-2212

REINSTATEMENT

NAME: PEOPLE3, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight EX 1156

EXAMINER'S INITIALS

BINISION OF CORPORATION