

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

~~2002-2003~~
**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 FEB -6 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600011893686

02/06/03--01001--027 **50.00

1. DOCUMENT # L01000011447

Name and Mailing Address

0000424 01 FP 0.352 **PRSRT T2 0 0615 32746-338375



ANSARA INVESTMENT, LLC
4106 WEST LAKE MARY BLVD.
SUITE 325
LAKE MARY FL 32746-3383



500013549305

2. New Mailing Address		4. State/Country of Formation FL 03/05/03 0105504	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 50.00 07/13/2001	
Principal Place of Business 4106 WEST LAKE MARY BLVD. SUITE 325 LAKE MARY FL 32746	3. New Principal Place of Business Address City, State, Zip	6. FEI Number	Applied For Not Applicable
		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent ANSARA, ASHLEY A 4106 WEST LAKE MARY BLVD. SUITE 325 LAKE MARY FL 32746	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent _____ Date _____

REGISTERED AGENT MUST SIGN

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	ANSARA, ASHLEY A	4106 WEST LAKE MARY BLVD.	LAKE MARY FL 32746
MGRM	ANSARA, MAHA F	4106 WEST LAKE MARY BLVD.	LAKE MARY FL 32746
<p style="font-size: 48px; font-weight: bold;">UBR FOR</p> <p style="font-size: 48px; font-weight: bold;">2002 + 2003</p>			

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager Ashley Ansara Date _____ Daytime Phone # _____

Typed or printed name of signing Managing Member/Manager

CR2E084 (8/02)

201000011447
ANSARA INVESTMENTS L.L.C.

1106 W. Lake Mary Blvd, Suite 325
Lake Mary, FL 32746-3383

FILED
03 FEB - 6 AM 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 12, 2003

State of Florida
Division of Corporations
Tallahassee, FL

REF: ANSARA INVESTMENTS L.L.C.
L01000011447

To Whom It May Concern:

Enclosed herewith is an application for reinstatement for the above captioned corporation, which has been administratively dissolved as a result of failure to file an annual report.

Please be advised that the report was not received and we only became aware of the filing requirements when we received the "Notice of Dissolution"

We have enclosed herewith a check in the amount of \$50.00 in payment of the annual fee. We respectfully request that the corporation be reinstated and that any penalties be waived.

Thank you for your attention and anticipated corporation in this matter.

Sincerely,

Ashley Ansara

Enclosures