

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 JUL 27 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002188

1. Corporation Name

ANU BHAWAN, INC

2. Principal Office Address

127 BARRINGTON DRIVE

Suite, Apt. #, etc.

3. Mailing Office Address

127 BARRINGTON DRIVE

Suite, Apt. #, etc.

City & State

BRANDON, FLORIDA

City & State

BRANDON, FLORIDA

Zip

33511

Country

USA

Zip

33511

Country

USA

REINSTATEMENT 95-01

4. Date Incorporated or Qualified
To Do Business in Florida

APRIL 29, 1994

5. FEI Number

59-3236889

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MAGAN BAKRANIA 542.50-ADM

Street Address (P.O. Box Number is Not Acceptable)

127 BARRINGTON DRIVE 61.25 AR

Suite, Apt. #, Etc.

8.75 Cost

City

BRANDON

State

FL

Zip Code

33511

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 817.0503, F.S.

Signature of
Registered Agent

Magan Bakrania

REGISTERED AGENT MUST SIGN

Date

7/22/01

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/D	NAROTAM J. PATEL	2000 WILLIAM C. GOOD BLVD	FRANKLIN, OH 45005
V/D	ANANT N. PATEL	1610 EVERGREEN PLACE	ELKHART, IN 46514
S/D	URMILA N. PATEL	2000 WILLIAM C. GOOD BLVD	FRANKLIN, OH 45005
D	MAGAN BAKRANIA	127 BARRINGTON DRIVE	BRANDON, FL 33511

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 807 or 817, 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 807.0401 or 817.0401, 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)(f), 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:

Magan Bakrania

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/22/01

CR2E081 (9/00)