

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 11:27

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P02000036536**

1. Corporation Name
CHANDNI STUDIO, INC.

Principal Place of Business

Mailing Address

~~1921-CENTRAL FLA PKWY STE C
 ORLANDO FL 32837~~

~~1921-CENTRAL FLA PKWY STE C
 ORLANDO FL 32837~~



REINSTATEMENT 03

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

7549 BROKERAGE DRIVE

7549 BROKERAGE DR.

03/26/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Applied For

ORLANDO, FL

5. FEI Number

Not Applicable

City & State
32809 USA

City & State
ORLANDO, FL

03-0430422

Zip Country

Zip Country
32809 USA

6. CERTIFICATE OF STATUS DESIRED

\$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
D	SHARMA, NAVODITA	1921 CENTRAL FLA PKWY STE C	ORLANDO FL 32837

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SHARMA, NAVODITA
~~1921-CENTRAL-FLA-PKWY-STE-C
 ORLANDO FL 32837~~

Name **SHARMA, NAVODITA**
 Street Address (P.O. Box Number is Not Acceptable)
7549 BROKERAGE DRIVE
 Suite, Apt. #, Etc.
ORLANDO, FL
 City State Zip Code
FL 32809

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

Navodita Sharma
 REGISTERED AGENT MUST SIGN

Date

10/30/03

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:

Navodita Sharma
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/30/03

Daytime Phone #

CR2E040 (7/03)

**CHANDNI STUDIOS, INC.
7549 BROKERAGE DRIVE
ORLANDO, FL 32809
(407) 206-7321**

October 30, 2003

Florida Dept. of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: Chandni Studios, Inc. FEI # 03-0430422

Dear Sirs:

Attached please find the Application for reinstatement we received forwarded from our old mailing address.

In March, we sent the original application and fee of \$150.00 to your offices. We didn't receive the letter dated May 21 or 29, because it was sent to the wrong address, and for some reason, they didn't forward that to us.

We called your offices, and they informed us that we should send the change of address on the reinstatement form and include our FEI #, since that was the reason for the letter and the hold up in our registration with you.

Please let me know if there are any questions, or if you need anything further to put Chandni Studios in good standing as a Corporation in the State of Florida.

Thank you for your time and attention to this matter,



Elaine Barry
Controller

Encl.