2005 FOR PROFIT CORPORATION REINSTATEMENT

	1/211/01/2						
DOCUMENT # P03000015726			FILED				
1. Entity Nam ANUAR L	e AWN SERVICE, INC.			05 JAN 27 AM 9: 50			
	, , , , , , , , , , , , , , , , , , , ,			05 JAN 27 RIT 5			
Principal Place	e of Business	Mailing Address		SECHLIARY OF STATE TATLAHASSEE, FLORIDA			
2960 56 AVE	E. NE	2960 56 AVE. NE		TAI LAHA SULLE I W			
NAPLES, FL	34120	NAPLES, FL 34120					
	100	3. Mailing Address					
,	lace of Business Sea Island Road	PO Box 112	259		rango Hinn		
Suite, Apt.		Suite, Apt. #, etc.		DOINET BENEVIEW E098 (6/0	4) (4)		
City & State	_ / / / /	City & State	Florida		Applied For		
Ff M	Country	Vaples /	Country	73-1725390 \$8.75	Not Applicable		
3391	2 Lee	34108	Collier	5. Certificate of Status Desired Fee Requ			
- Name					7. Name and Address of New Registered Agent		
JAMETTE, ANUAR 2960 56 AVE. NE Street Address (F				ress (P.O. Box Number is Not Acceptable)	(P.O. Box Number is Not Acceptable)		
NAPLES, FL 34120 7.4.2.9				9 Sea Island Road			
			City	f to Zip C	ode		
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office or re	gistered agent, or both, in the State of Florida. I am familiar w	th, and accept		
the obligations of registered agents							
SIGNATURE Signature, typod gymfyrfied name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FI	LE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(corporation did not receive the pri			
10.	OFFICERS AND E	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS IN 11		
TITLE	P	Delete	TITLE P	TAMEHE, ANNAT & Chan	ge 🔲 Addition		
NAME STREET ADDRESS	JAMETTE, ANUAR 2960 56 AVE. NE		STREET ADDRESS	1429 Sea Ishand Road			
CITY-ST-ZIP	NAPLES, FL 34120	Пан		=f.Myers FC. 339/2	ge		
NAME		☐ Delete	TITLÉ NAME	000046019020			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	02/04/0501015007 **30	3.73		
TITLE		☐ Delete	TITLE	☐ Chan	ge Addition		
_NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP		-		
TITLE NAME		Delete	TITLE NAME	☐ Chan	ge 🔲 Addition		
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP		□ Delete	CITY-ST-ZIP	☐ Char	ae 🗆 Addition		
NAME		CT Detate	NAME				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
777.5		☐ Delete	TITLE	☐ Char	ge		
TILLE							
NAME STREET ADDRESS			NAME STREET ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with on this report or supplemental report is	this filling does not quality for true and accurate and that manned to accurate and that manned to accurate and the constitution of the cons	STREET ADDRESS CITY-ST-ZIP	I in Section 119.07(3)(i), Florida Statutes. I further certify that to the same legal effect as if made under oath that I am an offer SOZ Florida Statutes; and that my page appears in Block.	ne information icer or director		
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the co	certify that the information supplied with d on this report or supplemental report is rporation or the receiver or trustee empo , or on an attachment with an address, w	true and accurate and that m wered to execute this report a	STREET ADDRESS CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutes. I further certify that to the same legal effect as if made under oath; that I am an officer 607, Florida Statutes; and that my name appears in Block	ne information icer or director 0 or Block 11 if		
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the co-changed	d on this report or supplemental report is reporation or the receiver or trustee empo , or on an attachment with an address, w	true and accurate and that m wered to execute this report a	STREET ADDRESS CITY-ST-ZIP the exemption state by signature shall have as required by Chap	d in Section 119.07(3)(i), Florida Statutes. I further certify that the the same legal effect as if made under oath; that I am an officer 607, Florida Statutes; and that my name appears in Block of the same I are the	0 or Block 11 if		