2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000133856

City-St-Zip:

TAMPA, FL 33617

FILED Sep 30, 2005 Secretary of State

Entity Nan	ne: FOR INI	DIANS, INC.			
Current Principal Place of Business:			New Principal Place o	f Business:	
12842 N 56 TAMPA, FL	TH STREET . 33617				
Current Mailing Address:			New Mailing Address:		
12842 N 56 TAMPA, FL	TH STREET . 33617				
FEI Number:	20-1660205	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US			12842 N 56TH STREET	VATTIKUTI, USHASREE P 12842 N 56TH STREET TAMPA, FL 33617 US	
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: USHASREE VATTIKUTI				09/30/2005	
	Electro	onic Signature of Registered Ager	nt	Date	
		93(2)(b), F.S., the corporation did not ng Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PST (VATTIKUTI, U 12842 N 56TH TAMPA, FL 3	STREET	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	D (KOTHAPALLI, 12842 N 56TH TAMPA, FL 3	STREET	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	,) Delete ENKATESWARA I STREET	Title: (Name: Address:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: USHASREE VATTIKUTI P 09/30/2005