PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENTOF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P98000038398
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1. Corporation Name

ANSHAR RESEARCH, INC.

Principal Place of Business

Mailing Address

3120 N. ATÂ 1501

5027 SW MOORE ST

FT PIERCE EL 34949

REINSTATIVIENT

FILED

03 DEC -8 PH 12: 47

above addresses are incorrect in any way, line thr	11/18/0301020020 **150.00				
New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable	Date Incorporated or Qualified To Do Business in Florida	04/21/.:	100:	a.
ite, Apt. #, etc.	Suite, Apt. #, etc. STe. M-3	_5. FEI Number	<u> </u>		Applied For

65-0835294

\$8.75 Additional Fee required

344	44 USH 34	<u> 44 4 </u>	UZU	02/11/10/11/2 01 01/1/00	for a Certificate of St	atus	
7. Names	and Street Addresses of Each Officer and/or Director	(Florida nonprofit d	corporations must list at lea	ast 3 directors)			
Title(s)	2 and/or birectors		Street Address of Each Officer and/or Director 5027 SW MOORE OF		City / State / Zip PALM CITY FL 34990		
PD							
PD	BILLITTERI, Authory	T. 2600	So. Kanner	. M-3 Hwy STUI	PET, FL 34994		
							

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BILLITTERI, ANTHONY J 5027 SW MOORE ST PALM CITY FL 84990

ess (P.O. Bex Number is Not Accep

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

REGISTERED AGENT MUST SIGN

Date 11-1-03

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 filling 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:

Anshar Research, Inc. 2600 South Kanner Hwy. Stuart, Florida 34994 Suite M-3 772-223-8188

December 4, 2003

Division Of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, Florida 32314-6327

Reinstatement

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Attention: Barbara 850-245-6028

Please advised that neither UBR notice mailings were received therefore no penalties are due. You have my check #378 dated 11-05-03 in the correct amount of \$150.00 in your possession.

Thanks you for your attention to this matter.

ANSHAR RESEARCH, INC.

A. J. Billitteri President

rresident