

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 FEB 21 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000081749

1. Corporation Name

NAVAL CONSULTING SERVICES, INC.

Principal Place of Business

9 SW 13TH STREET
FORT LAUDERDALE FL 33316

Mailing Address

9 SW 13TH STREET
FORT LAUDERDALE FL 33316

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

2. New Principal Office Address, If Applicable

21315 SW 87th Ct

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

21315 SW 87th Ct

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

09/15/1999

5. FEI Number

65-0948016

Applied For

Not Applicable

City & State

Fort Lauderdale, FL
Zip 333189 Country USA

City & State

Fort Lauderdale, FL
Zip 333189 Country USA

6. CERTIFICATE OF STATUS DESIRED

\$9.75 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DP	MOORE, J. ROBERT	9 SW 13TH STREET	FORT LAUDERDALE FL 33316
DV	GULE-MOORE, PAULINA	9 SW 13TH ST	FORT LAUDERDALE FL 33316
DV	Gule-Moore PAULINA	21315 SW 87th Ct MIAMI	MIAMI, FL 33189
DP	MOORE, J. Robert	21315 SW 87th Ct MIAMI, FL 33189	000009982860 01/09/03--01030--001 **150.00
			000009982860 02/21/03--01106--007 **308.75

8. Name and Address of Current Registered Agent

JOHNSON, SEAN
9 SW 13TH STREET
FORT LAUDERDALE FL 33316

9. Name and Address of New Registered Agent

Name THOMAS Leffingwell
Street Address (P.O. Box Number is Not Acceptable)
11 SE 7th St.
Suite, Apt. #, Etc.
Pompano Beach FL 33060

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

2/16/02

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/06/03 (786) 293-9940

State of Florida
Business license
Division of Corporations

Dear Sir or Madam,

We wish to communicate a request for exception to penalty on non-receipt of notices.

Our ex-accountant Sean Johnson delivered attached notices on October 31, 2002 just after receiving payment of settlement as we were in legal dispute with his company. Statement of settlement also attached.

Please, accept \$150.00 as a full payment for annual report.

~~Please, correct mailing address, principal place of business and street address of each~~
officer to the following: 21315 SW 87 CT
Miami, FL 33189

Please, correct the name of the following officer to: Pavlina Guk-Moore.

Kind regards,

Robert Moore.

Naval Consulting Services, Inc.
President

Ph.: (786) 942-1855

