PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N97000005788

ASSOCIATION OF RUSSIAN CADETS, INC.

FILED 05 FEB 28 AM 10: 01 SEURETARY OF STATE TALLAHASSEE, FLORIDA

2. Principal Office Address 96 KARASSIK 7313 EATON COURT Suite, Apt. #, etc.	3. Mailing Office Address C/O SHIRNOW 5723 EASTWIND DRIVE Suite, Apt. #, etc.	REISTATENENTUL-US
City & State UNIVERSITY PARK, FL Zip Country 34201 USA	City & State SARASOTA FL Zip Country 34233 USA	To Do Business in Florida 10/10/1997 -5FEI Number Applied For Not Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
Street Address (P.O. Box Number is	7. Name and Address of Current Registrem. D. SMIRNOW Not Acceptable) STWIND DRIVE	ered Agent
SAR ASOTA		State Zip Code 342 3 3

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Date FEB 23, 2005 Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of Officers and/or Directors Titles City / State / Zip KARASSIK, PAUL 7313 EATON COVRT UNIVERSITY PARK FL34201 ODESSA, FL 33556 ARTZIBUSHEV, DR. CONSTANTIN 165.59 HUTCHINSON ROAD SLABBERS KIRA 6060 SHORE BLYDIS, #900 GULFPORT FL 33707 SMIRNOW, DIETER D SARASOTA FL 34233 5720 EASTWIND DRIVE 4728 N. LARAMIE AVE HANTEL LEONID CHICAGO, IL

10. 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:

DIETER D. SMIRNOW

2/23/05 (941) 922-989-