

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

DOCUMENT # H41550

1. Corporation Name

ARUBA INTERNATIONAL, INC.

99 NOV -9 PM 5:15

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business

8067 Cadiz Ct., N
 Orlando, FL 32836

Mailing Address

8067 Cadiz Ct., N
 Orlando, FL 32836

[Handwritten signature]

REINSTATEMENT 1999

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

2. New Principal Office Address, If Applicable

5189 Vineland Road
 Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

5189 Vineland Road
 Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida

02/07/85

5. FEI Number

59-3161383

Applied For

Not Applicable

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32811

Country

USA

Zip

32811

Country

USA

6. CERTIFICATE OF STATUS DESIRED

\$8.75 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)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PVS	Rene Gutierrez	5189 Vineland Road	Orlando, FL 32811
TD	Rene Gutierrez	5189 Vineland Road	Orlando, FL 32811
VP	Ed GXXYariAn	8067 Cadiz Ct. N	Orlando, FL 32836
S	Keith Young	2245 Via Tuscan	Winter Park, FL 32789
VP	Lillian Merrill	7442 Sugar Bend Dr.	Orlando, FL 32819

8. Name and Address of Current Registered Agent

Ed G. Yarian
 8067 Cadiz Ct., N
 Orlando, FL 32836

9. Name and Address of New Registered Agent

Name
Lillian Merrill
 Street Address (P.O. Box Number is Not Acceptable)
9000 Bay Hill Blvd.
 Suite, Apt. #, Etc. **700003054257-8**
 City **Orlando**
 State **FL** Zip **32819**

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.

Signature of Registered Agent

Lillian Merrill
 Lillian Merrill REGISTERED AGENT MUST SIGN

Date 11/8/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30.

Yes No

(See other side for information on intangible tax.)

12. 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: By:

Lillian Merrill, Vice President
 Lillian Merrill

11/8/99

(407) 876-8017
 Daytime Phone #

CREATED (12/98)