

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 APR 14 AM 7:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000009419

1. Corporation Name

AURELUS ENGINEERING, INC.

2. Principal Office Address

145 NE 165th Street

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33162-3437

Country

USA

3. Mailing Office Address

145 NE 165th Street

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33162-3437

Country

USA

100016324531
04/18/03--01055--013 **221.25

**4. Date Incorporated or Qualified
To Do Business in Florida**

01-24-01

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Clece Aurelus

Street Address (P.O. Box Number is Not Acceptable)

145 NE 165th Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

3312-3437

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
Registered Agent

Clece Aurelus

Date 03-28-03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Clece Aurelus	145 NE 165th Street	Miami, FL 33162-3437

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 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:

Clece Aurelus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Clece Aurelus

03-28-03

Date

305.332.1834

Daytime Phone #

CRZE081 (10/02)

21 4/15

AURELUS ENGINEERING, INC.

145 NE 165th Street
Miami, FL 33162-3437
Phone: 305-332-1834 Fax: 305-354-2827

March 28, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RECEIVED
03 APR 14 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: Aurelus Engineering, Inc. Aurelus Engineering Corporation
P01000009419 W03000009097
Reinstatement Application and Fees

To Whom It May Concern:

This is a request for the reinstatement of the above-mentioned corporation. Uniform Business Reports (Annual Reports) for 2002 and 2003 were not received.

A check for two hundred twenty one dollars and twenty-five cents (\$221.25) for the annual reports is included. Please apply the \$78.75 received for Aurelus Engineering Corporation for the total of three hundred dollars (\$300.00).

I am also requesting that the reinstatement fee of six hundred dollars (\$600.00) be waived.

If you have any questions or require additional information, please contact me.

Sincerely,



Clece Aurelus, PE
President