PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUL 12 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000047809

1. Corporation Name
Teched-Ventures

3698 NW 15th Street
8701 Banyan Court

REINSTATEMENT 03-04

2. Principal Office Address	**3.** Mailing Office Address
3698 NW 15th Street	8701 Banyan Court
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lauderhill, Florida	City & State: Tamarac, Florida
Zip: 33311 / Country: United States	Zip: 33321 / Country: United States

4. Date Incorporated or Qualified To Do Business in Florida 5/1/2002

5. FEI Number 01-0681987 ☐ 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: Edward Miller

100003000947 4
07/12/04--01021--011 **900.00

Street Address (P.O. Box Number is Not Acceptable): 3698 NW 15th Street

Suite, Apt. #, Etc.:

City: Lauderhill | State: FL | Zip Code: 33311

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: Edward W Miller — Date: 6/30/04

REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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
Pres.	Edward W Miller	3698 NW 15th Street	Lauderhill, FL 33311
V.P.	Jocelyn Carter-Miller	3698 NW 15th Street	Lauderhill, FL 33311

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: Edward W Miller — 6/30/04 — 954-321-6777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #