

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1402

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

2006 OCT 24 PM 2:25

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # V51311

1. Corporation Name

United American Corporation

2. Principal Office Address

4150 Ste-Catherine Quest

3. Mailing Office Address

4150 Ste-Catherine Quest

Suite, Apt. #, etc.

Suite 200

Suite, Apt. #, etc.

Suite 200

City & State

Montreal, Quebec

City & State

Montreal, Quebec

Zip

H3Z 0A1

Country

Canada

Zip

H3Z 0A1

Country

Canada

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

7/17/1992

5. FEI Number

95-4720231

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

Corporate Access, Inc

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

236 East 6th Avenue

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32303

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

Date

10/24/06

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, V, S, T, D	Simon Lamarche	4150 Ste-Catherine Quest, Suite 200	Montreal, Quebec H3Z 0A1
D	George Metrakos	4150 Ste-Catherine Quest, Suite 200	Montreal, Quebec H3Z 0A1
			500081630115 11/09/06--01032--009 **300.00

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

OCT 23/06

Daytime Phone #

514-313-6010

29<sup>2</sup>

**UNITED AMERICAN CORPORATION**  
**4150 Ste-Catherine Quest, Suite 200**  
**Montreal, Quebec H3Z 0A1**

October 23, 2006

**Via Mail**

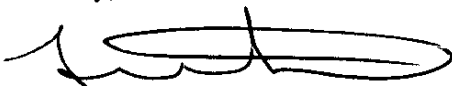
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

***Re: Reinstatement of United American Corporation (the "Company")***

To Whom it May Concern;

The address for United American Corporation has changed. As a result, the Company never received the Annual Report due for 2005 filing period. The Company respectfully requests that your office waive the reinstatement fee and accept the attached the reinstatement to bring the Company in current standing with the state.

Sincerely,



George Metrakos  
Director

Attachments