

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # 814689

1. Corporation Name

TRAK MICROWAVE CORPORATION

Principal Place of Business

Mailing Address

4726 EISENHOWER BLVD.
P O BOX 21247
TAMPA FL 33634

4726 EISENHOWER BLVD.
P O BOX 21247
TAMPA FL 33634

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/29/1960

5. FEI Number

81-4689392

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D/AS/ 14	ALLSTAFF, KENNETH R THOMAS J. Campbell	4726 EISENHOWER BLVD 660 MADISON AVE 14th FL	TAMPA FL 33634 New York, NY 10021
T	FRANSEN, DENNIS C	4726 EISENHOWER BLVD	TAMPA FL 33634
CD	GAMP, MICHAEL Robert B. McKeon	10500 WEST OFFICE DRIVE 660 MADISON AVE 14th FL	HOUSTON TX 77042 New York, NY 10021
DAS 5	TIPPINS, RANKIN J CHARLES L. POURCIAU, JR	10500 WEST OFFICE DRIVE 4726 EISENHOWER BLVD	HOUSTON TX 77042 Tampa, FL 33634
V	TAYLOR, SERGE N	4726 EISENHOWER BLVD	TAMPA FL 33634
P	PARATO, VITO J	4726 EISENHOWER BLVD	TAMPA FL 33634

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Charles L. Pourciau, Jr.
REGISTERED AGENT MUST SIGN

Date

10/17/00

11. 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:

Charles L. Pourciau, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES L. POURCIAU, JR.,

Date

Daytime Phone #

160x700 813-981-7463

KE

REINSTATEMENT



100003430181--1

FILED
00 OCT 19 PM 3:02

SECRETARY OF STATE
TALLAHASSEE FLORIDA



ACCOUNT NO. : 072100000032

REFERENCE : 868640 5039004

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 758.75

ORDER DATE : October 18, 2000

ORDER TIME : 12:14 PM

ORDER NO. : 868640-010

CUSTOMER NO: 5039004

CUSTOMER: Mr. Charles Pourciau
Trak Microwave Corporation
4726 Eisenhower Boulevard

Tampa, FL 33634-6391

DOMESTIC FILINGS

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
XX OCT 19 PM 12:51
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

NAME: TRAK MICROWAVE CORPORATION

REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY
XX CERTIFICATE OF STATUS

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS _____