FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

10 APR 14 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 827677

1. Corporation Name

Peerless Electronics Inc.

300175653803
04/14/10--01002--011 **758.75

REINSTATEMENT 06-10

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
700 Hicksville Road	PO Box 9052 700 Hicksville Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bethpage, NY	City & State: Bethpage, NY
Zip: 11714 Country: USA	Zip: 11714 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: March 22, 1972

5. FEI Number: 11-1558418 ☐ 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: C T Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island

Suite, Apt. #, Etc.:

City: Plantation State: FL Zip Code: 33324

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: Juan Grajeda REGISTERED AGENT Juan Grajeda Assistant Secretary Date: 4/8/10

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
C/P/D	Alvin Shankman	700 Hicksville Road	Bethpage, NY 11714
V	William Gallucci	700 Hicksville Road	Bethpage, NY 11714
V	Robert M. Levine	700 Hicksville Road	Bethpage, NY 11714
V	David Rome	700 Hicksville Road	Bethpage, NY 11714

10. E-mail Address: Rlevine@peerlesselectronics.com
(To be used for future annual report notification)

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. I further certify, 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: Robert M. Levine CFO/ VP Finance 4/9/10 516-594-3517

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

4/14 gw