PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING	THIS FORM.
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APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

COMPUTERVISION CORPORATION

Principal Place of Business	Mailing Address
100 CROSBY DRIVE 149:81-19 - BEDFORD MA 01730 -	100-0R098Y-8RIVE M3-21-13 BEDF ORD-MA-01780 -

99 MPR 29 PH 2: 15

MITAGNOSE C. FLORIDA

MOTATEMENT	r/) (V	Ï

M9 21-43 BEDFORD MA 01720 If above addresses are incorrect in any way, line through incorrect 2. New Principal Office Address, If Applicable 128 Technology Drive 128 Suite, Apt. #, etc. Suite, Ap Waltham Waltham Waltham City & State			100-070984 149-21-49 - BEDFORD-14		.					
			128 Te Suite, Apt. #, Waltha City & State Mass.	3 Technology Drive Apt.#,etc tham State		4. Date Incorporated or Qualified To Do Business in Florida 5. FET Number 04-2491912		09/13/1 2	09/13/1973 Applied For Not Applicable	
Zip 02453		Country	Zip	Cou	•		E OF STATUS DESIR	\$8.75 Add	ditional Fee required	
	and Street Ade	USA dresses of Each Officer and/	02453_	rida nonorofit como		1 ast 3 directors)		7		
Title(s)	and Street Addresses of Each Officer and/or Director (Flo Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers) 100 OROSBY DR 128 Technology Drive			4	City / State / Vi	p M		
-0E0- P/O/T						BEDFORD MA Waltham, MA 02453 BEDFORD MA Waltham, MA 02453				
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VPS						BEDFORD MA Waltham, MA 02453 BEDFORD MA Waltham, MA 02453 BEDFORD MA Waltham, MA 02453				
D										
-D -	WACNER, EDWARD STEVEN C. WALSKE									
-M P	RIMOLDI, ATTILIO			100 CROSBY DRIVE			BEDFORD MA			
1200 S	RPORATION 5. PINE ISLA	ND ROAD	Registered Age	nt		P.O. Box Number ∰	Address of New R			
PLANTATION FL 33324 Suite, Apt #, Et						0.799 - 0.11				

*Hillsall (z.#čal#900). (n)

10. I, being appointed the positioned agent of the te above names corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

THE MUST SIGN SPECIAL ASSISTANT SECRETARY Date 11-20-98

11 This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes 🛛 No

(See other side for information on intangible tax.)

12. 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 owed by the corporation have been paid and the names of individuals listed on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. *to the best of my knowledge

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/99 (791) 398 5000 Dayton, Phone #