

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JAN 16 PM 4:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00000001818

1. Corporation Name

KAE-TECH USA, INC.

REINSTATEMENT 03-04

2. Principal Office Address

1515 S. FEDERAL HIGHWAY

Suite, Apt. #, etc.

SUITE 401

City & State

BOCA RATON, FL

Zip

33432

Country

USA

3. Mailing Office Address

"SAME"

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

3/31/00

5. FEI Number

65-1005513

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

ANGELL CORPORATE SERVICES, INC. (SAME AS KAE-TECH USA, INC.)

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

ONE NORTH CLEMATIS STREET

Suite, Apt. #, Etc.

SUITE 400

City

WEST PALM BEACH

State

FL

Zip Code

33401

500027255915
01/20/04--01011--003 ***35.00

8. I, being appointed as registered agent, hereby agree to accept the obligations of a registered agent under chapter 607, F.S.

Signature of
Registered Agent

Angell Corporate Services, Inc., a Florida Corporation
By: *[Signature]* Via President
REGISTERED AGENT MUST SIGN

Date

January 13, 2004

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
D+O	STEVEN K. HUDSON DIRECTOR, PRES. & CEO	1515 S. FEDERAL HWY, STE 401	BOCA RATON, FL 33432
D	GILBERT S. PALTER DIRECTOR	1515 S. FEDERAL HWY, STE 401	BOCA RATON, FL 33432
D+O	SANDRA COWAN DIRECTOR & SECRETARY	1515 S. FEDERAL HWY, STE 401	BOCA RATON, FL 33432
O	DAVID O'TOOLE VICE PRESIDENT, FINANCE	1515 S. FEDERAL HWY, STE 401	BOCA RATON, FL 33432

SR 1/16/04

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. 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID E. O'TOOLE

Date

12/29/03 561-361-7600

Daytime Phone #

CR2E081 (10/02)

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