

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JAN -6 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F03000006054

1. Corporation Name

ROJAN ELECTRONICS, INC.

2. Principal Office Address

55 PAGE PARK DRIVE

Suite, Apt. #, etc.

City & State

BOGHKEEPSIE NY

Zip

12603

Country

US

3. Mailing Office Address

55 PAGE PARK DRIVE

Suite, Apt. #, etc.

City & State

BOGHKEEPSIE - NY

Zip

12603

Country

US

REINSTATEMENT 04

4. Date Incorporated or Qualified
To Do Business in Florida

5/04

5. FEI Number

14-1717817

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

RICHARD C. EMPERT

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

5648 YARDARM COURT

Suite, Apt. #, Etc.

40 RICHARD EMPERT

City

CAPE CORAL

State

FL

Zip Code

33914

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

Richard C. Empert

REGISTERED AGENT MUST SIGN

Date 11/2/2004

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
PRES	RICHARD EMPERT	5648 YARDARM CT	CAPE CORAL FL 33914
SECY	MICHAEL COLE	3560 RT. 9G	RHINEBECK, NY 112572
			300042558179 11/03/04--01046--010 **750.00

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 under section 119.07(3)(l), 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:

Richard C. Empert

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/2/04

Date

Daytime Phone #

CR2E08 (01/04)