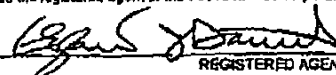
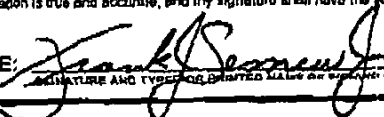


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DIVISION OF CORPORATE

06 MAY 10 AM 7:56

PLEASE READ ALL INSTRUCTIONS BEFORE

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F04000004364					
1. Corporation Name Micro Stamping Corporation					
2. Principal Office Address 140 Belmont Drive			3. Mailing Office Address 140 Belmont Drive		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Somerset, NJ			City & State Somerset, NJ		
Zip 08873	Country USA	Zip 08873	Country USA	4. Date Incorporated or Qualified To Do Business in Florida 7/29/2004	
5. FEI Number 22-2145568				Applied For ☐ Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐				\$3.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name Elizabeth J. Daniels, Esq.					
Street Address (P.O. Box Number is not acceptable) 911 Chestnut Street					
Suite, Apt. #, Etc.					
City Clearwater				State FL	Zip 33756
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 				Date 5/5/2006	
REGISTERED AGENT MUST SIGN					
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	
PC	Frank J. Semcer	360 Lake Road, P.O. Box 325		Far Hills, NJ 07931	
S	Frank J. Semcer Jr.	50 Welsh Road		Lebanon, NJ 08833	
REINSTATEMENT 05-06					
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 contained in Chapter 118, 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: 				Frank J. Semcer Jr. 5-8-06 732-302-0800	
SIGNATURE AND TYPE OF OFFICER OR TRUSTEE OR RECEIVER				Date Daytime Phone #	

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MAY 10 2006