

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 0000 F920000000099		99 MAR 31 AM 10:56 STATE OF FLORIDA TALLAHASSEE, FLORIDA	
1. Corporation Name IMI ELECTRONICS, INC.			
Principal Place of Business 7855 126TH AVE NORTH SUITE B LARGO, FL 33773		Mailing Address WCA-5168	
If above addresses are incorrect in any way, line through incorrect information and enter correction below			
2. New Principal Office Address, If Applicable 7855 126TH AVE NORTH SUITE B LARGO, FL 33773 USA		3. New Mailing Office Address, If Applicable 7855 126TH AVE N. SUITE B LARGO, FL 33773 USA	
4. Date Incorporated or Qualified To Do Business in Florida 11/4/92		5. FEI Number 04-2958860	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		Applied For Not Applicable	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PRES	HUGH AGNEW	PREMIER WAY, ABBEY PARK	ROMSEY ENGLAND
VP	ROBERT HILL	PREMIER WAY ABBEY PARK	ROMSEY ENGLAND
TRUS.	JOHN HUMMAR	PREMIER WAY, ABBEY PARK	ROMSEY ENGLAND
SEC.	ROBERT LAW	7855 126TH AVE N	LARGO FL 33773
0000002828300--0 -04/02/99--01096--019 ***1058.75 ***1058.75			
8. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEMS INC. 1201 HAYS ST. TALLAHASSEE, FL. 32301		9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc City State Zip Code	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Karen B. Rozar REGISTERED AGENT MUST SIGN Karen B. Rozar, As Its Agent		Date 3/31/99	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: Robert Law SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 2-17-99 Daytime Phone # 727-530-1213	