


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	<b>FILED</b> 05 FEB 16 PM 4:15 SECRETARY OF STATE TALLAHASSEE, FLORIDA  100046790221 02/17/05--01006--010 **300.00	
<b>DOCUMENT #</b> <i>F95000005031</i>				
<b>1. Corporation Name</b> <div style="text-align: center; font-weight: bold; margin-top: 10px;">MYDATA automation, Inc. 320 Newburyport Turnpike Rowley, MA 01969</div>				
<b>2. Principal Office Address</b> <div style="text-align: center; margin-top: 10px;">↑</div>		<b>3. Mailing Office Address</b> <div style="text-align: center; margin-top: 10px;">↑</div>		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
		<b>4. Date Incorporated or Qualified To Do Business in Florida</b> <i>10-17-95</i>		
		<b>5. FEI Number</b> <i>04-3219080</i> <div style="float: right; border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable</div>		
		<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> <b>\$8.75 Additional Fee required for a Certificate of Status</b>		
<b>7. Name and Address of Current Registered Agent</b>				
Name <i>Century Automation</i>				
Street Address (P.O. Box Number is Not Acceptable) <i>108 BAY Hammock Lane</i>				
Suite, Apt. #, Etc. <i>L</i>				
City <i>Longwood</i>		State <b>FL</b>	Zip Code <i>32719</i>	
<b>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.</b>				
Signature of Registered Agent <i>(See attached form for Signature)</i>		Date _____		
REGISTERED AGENT MUST SIGN				
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>				
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	
<i>Pres.</i>	<i>Brian Duffey</i>	<i>19 Anna's Way</i>	<i>Boxford MA</i>	
<i>Clerk</i>	<i>Jim De Marco</i>	<i>12 Hickory Ln</i>	<i>Ipswich MA</i>	
		<b>REINSTATEMENT</b> <i>04-05</i>		
<b>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)(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.</b>				
<b>SIGNATURE:</b> <i>James De Marco</i>		Date <i>2-15-05</i>	Daytime Phone # <i>978-948-6919</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				

CR2E081 (01/05)

*T. Lewis*



**MYDATA automation, Inc.**  
320 Newburyport Turnpike  
Rowley, MA 01969  
USA  
Tel: (978) 948-6919  
Fax: (978) 948-6915

Ms. Thelma Lewis  
Florida Department of State  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

Dear Ms. Lewis,

Please accept this letter as verification that MYDATA automation Inc., did not receive the earlier correspondence from the State of Florida in regards to the filings in arrears and therefore should be exempt from the reinstatement fees.

I appreciate all your help in resolving this issue.

Sincerely,

James L. DeMarco  
Chief Financial Officer