PLEASE READ	ALL INSTRU	CTIONS BEFORE	COMPLET	ING THIS FORM	W.F.	
APPLICATION FOR REINSTATEMENT	FOR Sandra B. Secretary			AND FILED 98 DEC -7 AM 9: 30		
DOCUMENT # F9600003438 1. Corporation Name				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
EAST WEST TECHNOLOGY CORP.						
Principal Place of Business	Place of Business Mailing Address		_			
119 CABOT SF. BABYLOH NY 11704						
If about addresses are incorrect in any year, line through incorrect information and outer correction helps.			BEIN	REINSTATEMENT 98		
If above addresses are incorrect in any way, line through incorrect information and enter correction be New Principal Office Address, if Applicable 3. New Mailing Office Address, if Applicable 15814 CALLBEAGE (IANA PO EX 220116			4. Date Incorp	Date Incorporated or Qualified To Do Business in Florida		
Suite, Apt. #, etc.			5. FEI Numbe	г	07/08/1996 Applied For	
City & State V & TER FLA Zip Country	WEST Palm	Country	6.	11-2321713 Not Applicable 6. \$2,75 Additional Fee required		
3347F USA	33422	U.SA.		E OF STATUS DESIRED 🔀	for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Flor Title(s) 1 2		Street Address of E Officer and/or Dire (Do NOT Use Post Office Bo	ach	City / State / Zīp		
EGO DAVIS, ALAN G		CABOT ST.	DR .	BABYLON NY 11704	ELA. CARRAN 33×18	
P LICHTMAN DAVID		19183 TRMDER LN		JUPITER FL		
P LICHTMAN DAVID VP LICHTMAN JECON	NE 39:	3910 SHERRUSTUR DR JUPITER FL 334777 301011271191559-3 -12/11/98-01004-025 ****750.00 *****750.00				
>				pg.	2/10	
8. Name and Address of Current Registered Agent Name Dodge				9. Name and Address of New Registered Agent WIN P. Brown		
DANIELS, THEODORE 11152 BOCA WOODS LANE BOCA RATON FL 33428	Street Address (P.O. Box Number is Not Acceptable) 30 Clematis 5+: Suite, Apt. #, Etc.					
Suite City talast 1				Adm Beach State Zip Code 33401		
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 Page 11/23/98						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No						
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 filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daytime Phone #						