PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

♣ FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000001895

1. Corporation Name

SMARTDISK CORPORATION

Principal Place of Business

Mailing Address

3506 MERCANTILE AVE. NAPLES EL 34104 3506 MERCANTILE AVE.

FILED

03 OCT 20 AM 9: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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| If above a | iddresses are | incorrect in any way, line t | nrough incorrect i | information a | ınd enter o | correction below. | | | | | |
| If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable | | | | | | | 4 Date Incorr | porated or Qualified | | | |
| 12780 WASKLINKS DRIVE 12780 WASKLINKS | | | | | | • • | To Do Rusiness in Florida | | | | |
| Suite, Apt. | | , etc. | | | 04/11/1997 | | | | | | |
| | | | | | | | 5. FEI Number | | | Applied For | |
| City & State City & State | | | | | | | 65-0733580 | | | Not Applicable | |
| | Mya | | | M-124 | | | 6. | | 0.75 | | |
| Zip つるへ、 | 3 | Country | Zip 330 | 3 | Country | | CERTIFICAT | E OF STATUS DESIRED 🔲 | o./5 Add for a Ce | litional Fee required rtificate of Status | |
| | | dresses of Each Officer an | | | | | st 3 directors) | | | | |
| Title(s) | Name of Officers and/or Directors | | | Street Address of Each Officer and/or Director | | | | City / State / Zip | | | |
| | - | | | | | | | - | | | |
| PD | BATTAGLIA, MICHAEL S | | | 12260 WESCHINKS DRIVE | | | NAPLES FL 34104 FOR MYNAS FY 33913 | | | | |
| | | | | | | | | | | | |
| D | EISCHED - | 12780 WASALLANS DALVE | | | NADLES EL 34104 | • | | | | | |
| U | FISCHER, ADDISON M | | | | FORE MANAGE | F1 | 33913 | | | | |
| tu | | | | | | FOR PRODUCT | , ' ' | | | | |
| D . | TOMLINSO | 200 PAGE MILL RD, 2ND FLOOR | | | PALO ALTO CA 94306 | | | | | | |
| D | IBARGUEN | 800 THE SAFEGUARD BLDG, 435 DEVO | | | WAYNE PA 19087 | | | | | | |
| CFO | QUINN, PETER | | | | 3508 MERCANTILE AVENUE | | | NAPLES FL S4184 | | | |
| D | KAMPOUR | VAN BEUREN ROAD | | | 16125 | MORRISTOWN NJ 07960 | | | | | |
| ~ ~ | KAMPOURIS, EMMANUEL A | | | | (| | | | | | |
| | 8 Nam | ne and Address of Curren | t Registered Ag | 167700 | CAC. D. C. | COOK LEGIS | 9 Name and | Address of New Registere | d Agent | 3340 | |
| | | | | | | Name | | | | | |
| | | | | | | | MASSON SEANIER COMPANY | | | | |
| SQRPAMERICA, INC. | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| 1201 HAYS STREET | | | | | 1201 404 | | | | | | |
| TALLAHASSEE FL-32301 | | | | | | Suite, Apt. #, Etc. | 411133 | - 1333 | | | |
| | | | | | City | | | Sta | te Zip (| Code | |
| | | | | | | TALLAY | 44844 | F | | 523 <i>0</i> N | |
| 10. I, being | appointed th | e registered agent of the al | ove named corp | oration, am f | amiliar wit | | | tion 607.0505, F.S. or 617.05 | | | |
| | | | | | | | Ī | 00002396 | 5 1 5 | 80 | |
| A1: | | dorbax | Car (188) | Brian | n Cou | rtnev | | | | _ | |
| Signature of Registered | Agent _ | | 11/1 <u>6/2</u> 0/11 | Ass | V.P | res | | Date /C/20 | 103 | | |
| · | <i>-</i> 7 | | REGISTERED AC | SENT MUST | SIGN | · | _ | | / | | |
| 11. I certify | that I am an o | officer or director or the rec | eiver or trustee e | mpowered to | execute | this application as p | rovided for in ch | apter 607 or 617, F.S. I furth | er certify | that when filing | |
| | | | | | | | | of section 607 0401 or 617 | | | |

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

SIGNATURE:

GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath,

Scensony 10.15.0

Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE :

AUTHORIZATION

\$ 150.00 COST LIMIT :

ORDER DATE: October 20, 2003

ORDER TIME : 4:02 PM

ORDER NO. : 286751-005

CUSTOMER NO: 7341296

CUSTOMER: Mr. Peter J. Quinn

Smartdisk Corporation 12780 Westlinks Drive

Fort Myers, FL 33913

DOMESTIC FILINGS

NAME: SMARTDISK CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight EX 1156

EXAMINER'S INITIALS

DIVISION OF CORPORATION

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Department of State, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32301

October 20, 2003

Re.: SmartDisk Corporation

Dear Sir or Madam

I am the Secretary of SmartDisk Corporation and I am in receipt of a Certificate of Administrative Dissolution or Revocation, Document Number: F97000001895 (the 'Certificate').

Included in the Certificate is a statement that the reason for the issue of the Certificate was the failure by SmartDisk Corporation ('SmartDisk') to file its 2003 corporation annual report/uniform business report.

I would advise that SmartDisk relocated to new premises at 12780 Westlinks Drive, Fort Myers, FL 33913 in mid February 2003 and did not receive, at that address, the requisite corporation annual report/uniform business report renewal documentation to facilitate its annual corporate filling obligations under Florida law.

Accordingly, I now attach a completed Application for Reinstatement, which updates SmartDisk's corporate records with the State, together with the required annual report fees and would request that you look favorably on SmartDisk's position by waiving the reinstatement fee.

Should it be necessary to contact me my direct telephone line is 239-425-4020.

Sincerely

Peter J Quinn

Secretary, SmartDisk Corporation