

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
04 MAY 28 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000004211

1. Corporation Name
Thinkpath Inc.

2. Principal Office Address
201 Westcreek Blvd

3. Mailing Office Address
201 Westcreek Blvd

REINSTATEMENT 03-04

Suite, Apt. #, etc.

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4. Date Incorporated or Qualified
To Do Business in Florida 8-11-97

City & State
Brampton, Ontario

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Brampton, Ontario

5. FEI Number
31-1323702

Applied For
Not Applicable

Zip L6T 5S6 Country Canada

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6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Ed Godwin
Street Address (P.O. Box Number is Not Acceptable) 9887 Fourth Street N 200037389432
Suite, Apt. #, Etc. 235 05/28/04--01003--015 **900.00
City St. Petersburg State FL Zip Code 33702

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 Ed Godwin Date 5/24/04
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
Pres	<u>Declan A. French</u>	<u>201 Westcreek Blvd</u>	<u>Brampton, Ontario L6T 5S6</u>
SIT CFO	<u>Kelly L. HanKinson</u>	<u>201 Westcreek Blvd</u>	<u>Brampton, Ontario L6T 5S6</u>
Dir	<u>Arthur Marcus</u>	<u>201 Westcreek Blvd</u>	<u>Brampton, Ontario</u>
Dir	<u>Lloyd MacLean</u>	<u>201 Westcreek Blvd</u>	<u>Brampton, Ontario</u>
Dir	<u>Patrick Power</u>	<u>201 Westcreek Blvd.</u>	<u>Brampton, Ontario</u>

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.

SIGNATURE: Declan French Date 5/18/04 Daytime Phone # 9105 460 3040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CFR2E081 (01/04)