

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT -9 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # F98000005244

Corporation Name

STALLION SYSTEMS UPGRADE, INC.

Principal Place of Business

4182 PINEWOOD LANE  
WESTON FL 33331

Mailing Address

4182 PINEWOOD LANE  
WESTON FL 33331

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 Incorporated or Qualified  
To Do Business in Florida

09/18/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

52-1864787

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	CHEN, CLAUDIA LU	4182 PINEWOOD LANE	WESTON FL 33331
VST	CHEN, EDSON	4182 PINEWOOD LANE	WESTON FL 33331

000023344158  
09/25/03--01080--021 \*\*300.00

8. Name and Address of Current Registered Agent

CHEN, EDSON  
4182 PINEWOOD LANE  
WESTON FL 33331

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

9/20/03  
9/20/03

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-20-03

9-20-03



**SCHOOL  
TECHNOLOGY  
SOLUTIONS**

September 22, 2003

Dear Friends,

Pursuant to your phone message about reinstating a company, we hereby request that the firm STALLION SYSTEMS UPGRADE, INC. be reinstated, as the renewal forms were never received by the agent.

Enclosed is the reinstatement form along with the filing fee (\$150 for each year).

Thank you for your cooperation.

Sincerely,

Edson Chen  
Stallion Systems Upgrade, Inc.

**FUTUREKIDS of South Florida**

4182 Pinewood Lane, Weston, FL 33331

Phone: 954-217-9985 • Fax: 954-389-2146 • Cell Phone: 954-298-0200

E-mail: [edson@futurekidsfla.com](mailto:edson@futurekidsfla.com) • [www.futurekidsfla.com](http://www.futurekidsfla.com)