

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAR -7 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F99000003855

1. Corporation Name

Data-Based Systems, Inc.

2. Principal Office Address

15411 Cumings Circle

Suite, Apt. #, etc.

3. Mailing Office Address

7866 Chase Meadows Dr. W.

Suite, Apt. #, etc.

City & State

Omaha, NE

City & State

Jacksonville, FL

Zip

68154

Country

US

Zip

32256

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

July 28, 1999

5. FEI Number

47-0814824

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Brian Ritchie

000013554450

03/05/03--01074--008 ***900.00

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

7866 Chase Meadows Drive West

Suite, Apt. #, Etc.

City

Jacksonville

State
FL

Zip Code

32256

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

Brian Ritchie

REGISTERED AGENT MUST SIGN

Date

2-25-03

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
CPT	Joseph Tenga	15411 Cumings Circle	Omaha, NE 68154
VS	Brian Ritchie	7866 Chase Meadows Dr. W.	Jacksonville, FL 32256

REINSTATEMENT

02-03
TS

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:

Brian Ritchie

Brian L. Ritchie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-25-03

Date

Daytime Phone #

904-997-6777

CR2E081 (10/02)