

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
0193

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 27 AM 9:52

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Furr
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G10272

1. Corporation Name
ADVANCED VIDEO TECHNOLOGY, INC.

2. Principal Office Address
822 SE 8th AVENUE
Suite, Apt. #, etc.

3. Mailing Office Address
SAME
Suite, Apt. #, etc.

City & State
DEERFIELD BCH, FL

City & State

Zip 33441 **Country** USA

4. Date Incorporated or Qualified To Do Business in Florida 01 1982

5. FEI Number 100004586441 ☒ 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 R. Stephen Ottwell

Street Address (P.O. Box Number is Not Acceptable)
Suite 130 The Courtyard 5301 N. Federal Highway

City Boca Raton **State** FL **Zip Code** 33487

100004586441-9
-09/13/01-01010-016
****300.00 ****300.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0401, 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 of Registered Agent See attached for Signature **REGISTERED AGENT MUST SIGN**

Date *****8.75 *****8.75

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
P	ENRIQUE J. LOPEZ	822 S.E. 8th AVENUE	DEERFIELD BCH FL 33441
S, T	HILDA LOPEZ	SAME	
		201.25 AR	
		10.00 AR ACT	
		88.75 AR SUPP	
			SP

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: Enrique J. Lopez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** 954-421-2132 **Daytime Phone #**

AVT USA INC

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822 SE 8TH AVE
DEERFIELD BEACH
FLORIDA 33441

PHONE: 954-421-2132
FAX: EMAIL: 954-421-6560

AUGUST 24, 2001

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 33314

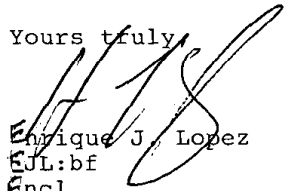
To Whom It May Concern:

Our Attorney contacted the Department of Corporations,
and on the year 2000 we did not receive our Status
form. The representative confirmed that the form had been
returned because we had moved.

We were told that we would be reinstated for \$300.00.

A check for \$300.00 is enclosed.

Yours truly,


Enrique J. Lopez
EJL:bf
Encl.

Also encl. \$8.75 for Certificate of Status

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Suite 130, The Courtyard, Boca Raton, Florida 33487.

Acceptance

Having been named as registered agent and designated to accept service of process for the above corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


R. STEPHEN OTTEWELL, Resident Agent

Date: September 17, 2001