

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT-27 AM 11:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **JS4031**

1. Corporation Name

Circuit Masters, Inc

300024168473  
10/27/03--01066--025 \*\*750.00

**REINSTATEMENT** 03

2. Principal Office Address 1711 West 38th Place		3. Mailing Office Address 1711 West 38th Place	
Suite, Apt. #, etc. 1103		Suite, Apt. #, etc. 1103	
City & State Hialeah, FL		City & State Hialeah, FL	
Zip 33012	Country USA	Zip 33012	Country USA

4. Date Incorporated or Qualified To Do Business in Florida 1/23/1987	
5. FEI Number 59-2761840	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Raymond J. Poirier Jr.	
Street Address (P.O. Box Number is Not Acceptable) 14303 Alamanda Ave	
Suite, Apt. #, Etc.	
City Miami Lakes	State FL
	Zip Code 33014

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 	Date 10/06/03
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.	Diana Y Poirier	14303 Alamanda Ave	Miami Lakes, FL 33014
V. Pres.	Raymond J. Poirier Jr.	14303 Alamanda Ave	Miami Lakes, FL 33014
Treas.	Raymond J. Poirier Jr.	14303 Alamanda Ave	Miami Lakes, FL 33014
Secre.	Gilma R. Lieber	4794 NW 192nd Street	Opalocka, FL 33055

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:	Raymond J Poirier Jr.	10/7/03	305-557-6774
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

gr 10/30

CR2E081 (10/02)