

15182

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR 30 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **1K92813**

1. Corporation Name

Select Microsystems Inc.

2. Principal Office Address

1555 N. HWY A1A

Suite, Apt. #, etc.

204

City & State

Indianapolis IN

Zip

32937

Country

Brevard

3. Mailing Office Address

46 Mimosa Cir

Suite, Apt. #, etc.

City & State

Ridgefield CT

Zip

06877

Country

Fairfield

REINSTATEMENT 03-04

4. Date Incorporated or Qualified To Do Business in Florida

6/2/89

5. FEI Number

592958116

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

Paul M. Dreskin

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

468 St George Ct

Suite, Apt. #, Etc.

500031366655
03730794 01012 010 ***30.00

City

Satellite Beach

State

FL

Zip Code

32937

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

Paul M. Dreskin

REGISTERED AGENT MUST SIGN

Date

3/23/04

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	Paul M. Dreskin	46 Mimosa Cir	Ridgefield, CT 06877

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:

Paul M. Dreskin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/04

Date

914582-0034

Daytime Phone #

CR2E081 (01/04)

B 2 32

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I am writing this letter because we did not receive our corporate filing papers for the filing year 2003. I recently spoke to one of your agents who instructed me to write this letter, download and fill out the Corporation Reinstatement papers, and enclose a check for \$300.00 to cover corporate filing fees for 2003 and 2004.

If there are any questions please contact me at your earliest convenience. I can be reached at 914.582.0034.

Thank you for your time and attention!

Paul Dreskin

Paul M. Dreskin, President
Select MicroSystems Inc
FED ID: 59-2958116

K92813