

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 OCT -9 PM 2:43

DOCUMENT # **M39090**

1. Corporation Name

**Profitech Enterprises, Inc.**

2. Principal Office Address

**c/o N. Lloyd Burrows  
13320 SW 99th PL**

Suite, Apt. #, etc.

3. Mailing Office Address

**c/o  
N. Lloyd Burrows  
13320 SW 99th PL**

Suite, Apt. #, etc.

City & State

**Miami, FL**

Zip

**33176**

Country

**USA**

City & State

**Miami, FL**

Zip

**33176**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**1986**

5. FEI Number

**59-272-1002**

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

**N. Lloyd Burrows**

**600003422546-0**

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

**13320 SW 99th PL**

**10/12/00-01037-005**

**\*\*\*\*150.00 \*\*\*\*150.00**

Suite, Apt. #, Etc.

City

**Miami**

State

**FL**

Zip Code

**33176**

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

**N. Lloyd Burrows**

REGISTERED AGENT MUST SIGN

Date **10.4.00**

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
President	N. Lloyd Burrows	13320 SW 99th PL	Miami, FL 33176

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:

**N. Lloyd Burrows (N. Lloyd Burrows)**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**10.4.00 (305) 256-3912**

Date

Daytime Phone #

CR2E081 (9/99)

Profitech Enterprises Inc.  
13320 SW 99<sup>th</sup> Place  
Miami, FL 33176

## PROFITECH INC.

October 4, 2000

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

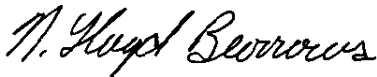
Dear Sir or Madam:

As per my discussion with Ms. Sprather, please find reinstatement application and check in the amount of \$150. This reinstatement is necessary do to my change of address that prevented me from receiving the standard corporate filing documents.

These were no doubt sent to the previous address of record (5401 SW 77<sup>th</sup> CT, #108E, Miami FL 33155) instead of the correct address listed. The oversight was not discovered until my accountant noticed that no check was sent in fiscal 1999-2000 regarding the Div. of Corporation's filing fee.

I apologize for the inconvenience and wish to thank you for your understanding in this matter.

Sincerely,  
N. Lloyd Burrows



President/encl.