

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

97 DEC 22 PM 1:49

OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make Check Payable To: Department of State

Name and Mailing Address of Corporation: DOCUMENT # M86955

Microtechnology, Inc.
1460 N.W. 107th Avenue
Suite G
Miami, FL 33172

2. If Address in Block 1 is incorrect in any way, enter the correct address below:

Address

City and State Zip Code

3. If Principle Office Address is different from mailing address, enter address below:

Address

City and State Zip Code

4. Date Incorporated or Qualified To Do Business in Florida: 6/20/88
5. FEI Number: 65-0088348
6. FEI Number Applied For:
7. FEI Number Not Applicable:
8. CERTIFICATE OF STATUS DESIRED []

Name and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Table with 4 columns: Title, Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Includes entry for P.S. T.D. Thomas Aguiar at 1460 N.W. 107th Ave. Suite G, Miami, FL 33172.

REINSTATEMENT 97
12-22-97

7000002380107-2
-12/23/97-01025-012
***758.75 ***758.75

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

Thomas Aguiar
1460 N.W. 107th Avenue
Suite G
Miami, FL 33172

9. If changed, new registered agent / office
Name
Street Address (Do NOT Use P.O. Box Number)
Street Address (Do NOT Use P.O. Box Number)
City State Zip
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0503, F.S.

Signature of Registered Agent: Thomas Aguiar
REGISTERED AGENT MUST SIGN
Date

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box [] (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes [] No [] (See other side for information on intangible tax.)

13. I certify that I am an officer or director of 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., and that all fees owed by the corporation have been paid. 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 Officer or Director: Thomas Aguiar
Date
Daytime Phone #

Typed or printed name of signing officer or director