PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 JUL -1 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****300.00 ****300.00

DOCUMENT # P00000045131

1. Corporation Name
Avant Garde Engineering, Inc.

2. Principal Office Address	3. Mailing Office Address
21910 Hale Road	21910 Hale Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Land O' Lakes, FL	City & State: same
Zip: 34639 Country: USA	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 05/05/2000

5. FEI Number: 59-3665803 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $6.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Ford, Buddy D.
Street Address (P.O. Box Number is Not Acceptable): 115 N. MacDill Avenue
Suite, Apt. #, Etc.:
City: Tampa State: FL Zip Code: 33609

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 _____
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
PD	Raymond E. Olivier	21910 Hale Road	Land O'Lakes, FL 34639
VD	Winthrop S. Barnett	708 East Virginia Ave	Tampa, FL 33603

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

avant·garde
engineering, inc.

June 21, 2002

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Dear State Officials:

It has recently come to my attention that our corporation status with the State of Florida is "inactive." After contacting your office, we discovered that the address you have on file for us is incorrect. Our annual filing package from your offices were never received by our staff. We are, therefore, requesting that our corporate status be reinstated without penalties.

I have enclosed a check for $300, as instructed by your staff, for the years we have been inactive. I believe that the records have been adjusted accordingly per my telephone call. Should that not be the case, please change our address on file to that shown on the enclosed application.

Thank you in advance for your prompt cooperation.

Sincerely,

Raymond E. Olivier
President

21910 Hale Road
Land O' Lakes, FL 34639
tel: (813) 996-0850
fax: (813) 996-4350

5032 Calle Minorga
Sarasota, FL 34242
tel: (941) 312-9032
toll free: (888) 948-1510