

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

03 DEC 23 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000093696

1. Corporation Name

CyberQuest Partners, Inc.
1235 Haddenham Drive
Cumming, GA 30041

2. Principal Office Address

1235 Haddenham Dr

Suite, Apt. #, etc.

City & State

Cumming, GA

Zip

30041

Country

USA

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

"

Zip

"

Country

"

REINSTATEMENT 01-03

600025725706

12/23/03--01033--003 **450.00

600025725706

12/23/03--01033--002 **8.75

4. Date Incorporated or Qualified
To Do Business in Florida

10-4-2000

5. FEI Number

65-1090519

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

Wily Wade

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

3921 W. Bay Ave

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33616

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

REGISTERED AGENT MUST SIGN

Date Nov 6, 2003

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	Mark Gray	1235 Haddenham	Cumming, GA 30041
Sec	Mark Gray	1235 Haddenham	Cumming, GA 30041

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

770-781-
Nov 6, 2003 6500

Date

Daytime Phone #

CR2E081 (9/01)

CyberQuest
Partners, Inc.

December 19, 2003

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

To Whom it May Concern:

Please find enclosed our Corporation Reinstatement filing and fee (check 2034) in the amount of Four Hundred & Fifty Dollars (\$450.00). We relocated to Atlanta, Georgia and as a result, have not received any correspondence relating to our annual report(s). I spoke with a representative of your office instructed me to complete the attached form and make the enclosed payment in this amount.

Additionally, we have enclosed a check in the amount of \$8.75 for a certificate of good standing. Please forward that to our Georgia address. Should you have any questions, or need additional information regarding this matter, please contact me at your first convenient opportunity. Your assistance in this matter is greatly appreciated.

Sincerely,


Mark E. Gray
President