

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC 27 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # P01000004593

1. Corporation Name

MANTEC CORP.

Principal Place of Business

2711 NE 49TH STREET APT #8
FT LAUDERDALE FL 33308

Mailing Address

2711 NE 49TH STREET APT #8
FT LAUDERDALE FL 33308



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/12/2001

5. FEI Number

65-1070559

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75. Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	EDDIN-MANAVI, SHABAH	2711 NE 49TH STREET APT #8	FT LAUDERDALE FL 33308

100009878681

11/07/02--01089--001 **550.00

8. Name and Address of Current Registered Agent

EDDIN-MANAVI, SHABAH
2711 NE 49TH STREET APT #8
FT LAUDERDALE FL 33308

9. Name and Address of New Registered Agent

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State FL	Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/02)

BERENFELD
SPRITZER
SHECHTER
& SHEER
CERTIFIED PUBLIC ACCOUNTANTS
A Partnership of Professional Associations

November 25, 2002

Mr. Sean Toner
Florida Department of Revenue
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Subject: Mantec Corp.
File Number: P01000004593
ID #: 65-10705509

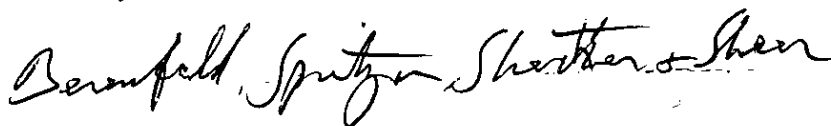
Dear Mr. Toner:

In response to your letter dated November 15, 2002, we are resubmitting a reinstatement application for Mantec Corporation.

Our client had moved to California and never received a Uniform Business Report notice for 2002. We ask you to waive any additional reinstatement costs and file the enclosed reinstatement application.

Thank you for your help in this matter.

Sincerely,



Berenfeld, Spritzer, Shechter & Sheer C.P.A.'s

enclosure

REPLY:

WESTON OFFICE

2237 N. Commerce Parkway, Suite 3, Weston, Florida 33326
Telephone: (954) 370-2727 Telefax: (954) 370-2776

MIAMI OFFICE

9655 South Dixie Hwy., Third Floor, Miami, Florida 33156
Telephone: (305) 274-4600 Telefax: (305) 274-4601