PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
02 OCT 24 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000034942**

1. Corporation Name

ADVANCED TECHNICAL ENTERPRISES, INC.

Principal Place of Business	Mailing Address
7011 NORTH ATLANTIC AVENUE SUITE 100 CAPE CANAVERAL FL 32920	7011 NORTH ATLANTIC AVENUE SUITE 100 CAPE CANAVERAL FL 32920

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
7011 North Atlantic Ave	7011 North Atlantic Ave
Suite, Apt. #, etc.: Suite 102	Suite, Apt. #, etc.: Suite 102
City & State: Cape Canaveral, FL	City & State: Cape Canaveral FL
Zip: 32920 Country: USA	Zip: 32920 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 04/05/2001

5. FEI Number: 22-3505607 ☐ 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
CEOP	KOHFELDT, CHARLES C JR.	7011 NORTH ATLANTIC AVENUE, SUIT	CAPE CANAVERAL FL 32920
TD	KOHFELDT, CHARLES C JR.	7011 NORTH ATLANTIC AVENUE, SUIT	CAPE CANAVERAL FL 32920
SD	NEMETH, NANCY	7011 NORTH ATLANTIC AVENUE, SUIT	CAPE CANAVERAL FL 32920
VP	Robert Cesaro	7011 N. Atlantic Suite 102	Cape Canaveral, FL 32920

000008567990
10/24/02--01062--008 **900.00

10/20

8. Name and Address of Current Registered Agent

KOHFELDT, CHARLES C JR.
7011 NORTH ATLANTIC AVENUE
SUITE 100
CAPE CANAVERAL FL 32920

9. Name and Address of New Registered Agent

Name: Charles C. Kohfeldt Jr.
Street Address (P.O. Box Number is Not Acceptable): 7011 North Atlantic Avenue
Suite, Apt. #, Etc.: Ste 102
City: Cape Canaveral | State: FL | Zip Code: 32920

CR2E040 (8/02)

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 — REGISTERED AGENT MUST SIGN — Date: 10-21-2002

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.

321-784-6556

SIGNATURE: SIGNATURE REQUIRED Charles C Kohfeldt Jr. 10/21/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #