

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 NOV -4 PM 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000041590

1. Corporation Name

SIGMA INTERNATIONAL HOLDINGS, INC.

Principal Place of Business

Mailing Address

~~1001 BLUE HERON WAY
PALM HARBOR FL 04600-5000~~

~~1001 BLUE HERON WAY
PALM HARBOR FL 04600-5000~~



700008784817
11/04/02--01074--009 **150.00

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

~~540 BOUNDARY BOULEVARD~~

~~540 BOUNDARY BOULEVARD~~

Suite, Apt. #, etc.
(SUITE A)

Suite, Apt. #, etc.
(SUITE A)

City & State
~~ROTONDA WEST, FLORIDA~~

City & State
~~ROTONDA WEST, FLORIDA~~

Zip
~~33947-2035~~

Country
~~USA~~

Zip
~~33947-2035~~

Country
~~USA~~

4. Date Incorporated or Qualified
To Do Business in Florida

04/24/2001

5. FEI Number

59-3724976

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/P	ROBERT C. G. DISNEY	1401 KEY STREET NORTHWEST 10TH F 540 BOUNDARY BLVD (SUITE A)	WASHINGTON DC 20005 ROTONDA WEST, FL 33947-2035
D/C	SHEILA D. DISNEY	540 BOUNDARY BLVD (SUITE A)	ROTONDA WEST, FL 33947-2035
T/S D/V	MICHAEL J. BURKE, CPA	418 MAIN STREET	GANTHERSBURG, MD 20878-5542

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~DISNEY~~
~~MARSHALL~~, SHEILA D
548 BOUNDARY BLVD., STE. A
ROTONDA FL 33947-2035

Name

SHEILA D. DISNEY

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

540 BOUNDARY BOULEVARD

Suite, Apt. #, Etc.

(SUITE A)

City

ROTONDA WEST

State

FL

Zip Code

33947-2035

CR20040 (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

SHEILA D. DISNEY
REGISTERED AGENT MUST SIGN

Date 10/26/02

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:

Michael J. Burke, U.P.
MICHAEL J. BURKE
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(301) 251-1020

YORKE, BURKE & LEE
CERTIFIED PUBLIC ACCOUNTANTS, P.A.

P.O. BOX 84030
GAITHERSBURG, MD 20883-4030
TELEPHONE: (301)251-1020
FAX: (301)251-0716

MEMBERS
AMERICAN INSTITUTE OF CPAs
MARYLAND ASSOCIATION OF CPAs

November 1, 2002

Division of Corporation
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

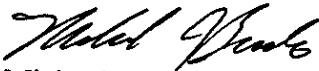
Re: Sigma International Holdings, Inc.
Doc # P01000041590

To Whom It May Concern:

Sigma never received their annual report form which was their first since incorporating 4/24/01.

Enclosed is the application for reinstatement plus the \$150 fee. Please call me if there are any questions.

Sincerely,



Michael J Burke, CPA
Sigma V.P. and CFO