

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 SEP 30 AM 8:00

DOCUMENT # P01000058360

1. Corporation Name

Aerospace Search, Inc.

REINSTATEMENT 02-04

800041495408
09/30/04--01045--003 **1058.75

MRB

2. Principal Office Address

1871 Commodore Point Dr.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orange Park FL

City & State

Orange Park FL

Zip

32003

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

8 JUNE 2001

5. FEI Number

59-3725485

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

John B. Hamilton

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

1871 Commodore Point Drive

Suite, Apt. #, Etc.

City

Orange Park

State

FL

Zip Code

32003

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

[Signature]
REGISTERED AGENT MUST SIGN

Date 29 Sept 04

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
<u>Pres.</u>	<u>John B. Hamilton</u>	<u>1871 Commodore Pt Dr.</u>	<u>Orange Park FL 32003</u>
<u>Exp</u>	<u>Lori A. Hamilton</u>	<u>1871 Commodore Point Dr.</u>	<u>Orange Park FL 32003</u>

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]

John B. Hamilton

29 Sept 04

9045343838

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)