

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 MAY -2 AM 10:54

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # PO1 0000 64324

1. Corporation Name  
Shreeji Engineering Incorporated

2. Principal Office Address  
415 N. Alafaya Trail

Suite, Apt. #, etc.

3. Mailing Office Address  
415 N. Alafaya Trail

Suite, Apt. #, etc.

City & State  
Orlando, FL 32828

Zip 32828 Country USA

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Orlando, FL

Zip 32828 Country USA

500018572885  
05/08/03--01067--024 \*\*150.00

4. Date Incorporated or Qualified  
To Do Business in Florida 6/27/01

5. FEI Number  
59-3745503

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 IKeji, Chuck  
Street Address (P.O. Box Number is Not Acceptable)  
5990 Braemar Place, #104  
Suite, Apt. #, Etc. #104  
City Orlando State FL Zip Code 32822

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 Chuck Ikeji

REGISTERED AGENT MUST SIGN

Date 4/29/03

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
D	Panchal, Sonal G	415 N. Alafaya Trail	Orlando, FL 32828
VP	Panchal, Romesh	415 N. Alafaya Trail	Orlando, FL 32828

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:

Sonal Panchal  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

AP-29-03

Daytime Phone #

Shreeji Engineering, Inc.  
415 N. Alafaya Trail  
Orlando, FL 32828  
April 24, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: REQUEST TO WAIVE REINSTATEMENT FEES FOR SHREEJI  
ENGINEERING, INC: DOC #P01000064324

To Whom It May Concern:

I am requesting that the reinstatement fee for the above mentioned corporation be waived because of the following reasons: I did not receive the 2002 Uniform Business Report and the subsequent notice from the Division of Corporations. My records show that I paid the filing fees of \$150.00 in 2002 with a form that I down loaded online.

I have completed the reinstatement form and a fee of \$150.00 for year 2003 is enclosed. Thank you for your cooperation. If you need further information feel free to contact me.

Sincerely,

  
Sonal Panchal