

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

06 MAY 19 AM 11:26

DOCUMENT # P01000087467.

1. Corporation Name

C E D Global Import Export Inc

2. Principal Office Address

35 CATALINA COURT

Suite, Apt. #, etc.

City & State

MISSIMMEE, FLORIDA

Zip

34758

Country

U.S.A.

3. Mailing Office Address

35 CATALINA COURT.

Suite, Apt. #, etc.

City & State

MISSIMMEE, FLORIDA.

Zip

34758

Country

U.S.A.

REINSTATEMENT

02-06

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

September 5, 2001

5. FEI Number

59-3751097

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

DAVID ANTHONY LAING

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

35 CATALINA COURT

Suite, Apt. #, Etc.

City

MISSIMMEE

State

FL

Zip Code

34758

800075654948

05/02/06 01006 004 **138.75

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 MAY 16, 2006

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>D</u>	<u>DAVID A. LAING</u>	<u>35 CATALINA COURT</u>	<u>MISSIMMEE FL 34758</u>
<u>D</u>	<u>CHRISTINE G. Charlton</u>	<u>35 CATALINA COURT</u>	<u>MISSIMMEE FL 34758</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 contained in Chapter 119, 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] DAVID A. LAING

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date MAY 17, 2006

Daytime Phone #

407-574-8860