

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -4 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000088177**

1. Corporation Name

HYDRA-SYSTEMS & ENGINEERING EQUIPMENT, INC.

Principal Place of Business

6000 N.W. 84 AVE.
SUITE 102
MIAMI FL 33166

Mailing Address

6000 N.W. 84 AVE.
SUITE 102
MIAMI FL 33166

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

2. New Principal Office Address, If Applicable

6000 NW 84 Ave.
Suite, Apt. #, etc.
Suite 102

City & State
MIAMI, FL

Zip **33166** Country **MIAMI-DADE**

3. New Mailing Office Address, If Applicable

P.O. BOX 451-433
Suite, Apt. #, etc.

City & State
MIAMI, FL

Zip **33245** Country **MIAMI, DADE**

4. Date Incorporated or Qualified
To Do Business in Florida

09/04/2001

5. FEI Number

65-1138670

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
PD	ECHEVARRIA, JULIO P	6000 N.W. 84 AVE.	MIAMI FL 33166
VD	PEREZ, JULIO	6000 N.W. 84 AVE.	MIAMI FL 33166

100024394451
11/04/03--01011--012 **150.00

8. Name and Address of Current Registered Agent

PEREZ, JULIO
6000 N.W. 84 AVE.
SUITE 102
MIAMI FL 33166

9. Name and Address of New Registered Agent

Name

Julio Perez

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

6000 NW 84 Avenue.

Suite, Apt. #, Etc.

Suite 102

City

MIAMI

State

FL

Zip Code

33166

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

REGISTERED AGENT MUST SIGN

Date

10/31/03

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(9)(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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Julio P. Echevarria

Date

10/31/03

Daytime Phone #

954-274-2414

CR2E040 (7/03)



HYDRA-SYSTEMS & ENGINEERING EQUIPMENT , INC.

6000 N.W. 84 Avenue,
Suite 102
Miami , Florida 33166
(P) 954-274-2414 (F) 305-221-2376
e-mail: hsee_usa@yahoo.com

October 31, 2003

Florida Department of State

Division of Corporations

409 E Gaines Street

Tallahassee, FL 32399

RE.: HYDRA – SYSTEMS & ENGINEERING EQUIPMENT, INC.

DOC NO. PO1000088177

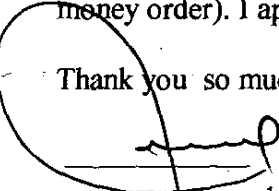
2003 UNIFORMS BUSINESS REPORT

Dear Sir/Madam:

I noticed that my Corporation has been dissolved for Uniform Business Report .Please note that I mailed the check (see copies attached) by itself . I never received the uniform Business Report Form and I never realized that you did not cashed the check.

Please advise if it is possible to file the annual form at the original fee US\$150.00 (I attached money order). I apologize for the inconvenient.

Thank you so much, sincerely


Julio Perez

Vice - President