

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 APR 15 AM 11:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P01000095693**

**1. Corporation Name**

Simplified Data Solutions, Inc.  
8550 Ulmerton Rd. Suite 150  
Largo FL 33771

**REINSTATEMENT 0203**

**2. Principal Office Address**

8550 Ulmerton Rd.

Suite, Apt. #, etc.

Suite 150

City & State

Largo, FL

Zip

33771

Country

USA

**3. Mailing Office Address**

same

Suite, Apt. #, etc.

City & State

Zip

Country

**4. Date Incorporated or Qualified  
To Do Business in Florida**

10/01/2001

**5. FEI Number**

59-3746523

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☒**

\$8.75 Additional Fee required  
for a Certificate of Status

2/11/02 90157 044 150.00

**7. Name and Address of Current Registered Agent**

Name

CT Corporation System

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

1200 S. Pine Island Rd.

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

**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

*Connie Bryan*

**CONNIE BRYAN**

**SPECIAL ASSISTANT SECRETARY**

4/15/2003

(REGISTERED AGENT MUST SIGN)

**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
President	Gerard Stuchbury	103 Jean Rd	W. Islip, NY 11795

**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:**

*Gerard Stuchbury*

Gerard Stuchbury, President 3/21/03

(516) 509-0647

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (10/02)