PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS





P01000114175 DOCUMENT

1. Corporation Name

EXTREME SECURITY NETWORKS CORP.

Principal Place of Business

Mailing Address

03 OCT 17 PM 2:58

SECRETARY OF STATE TALLAHASSEE, FLORIDA

4633 NW 94TH PLACE MIAMI FL 33178		4633 NW 94TH PLACE MIAMI FL 33178		A				
If above a	addresses are incorrect in any way, line thr	ough incorrect in	nformation and ente	r correction below.	REIN	STATEN	ENT 200	3
New Principal Office Address, If Applicable		3. New Mailing Office Address, If		f Applicable	Date Incorporated or Qualified To Do Business in Florida 12/03/2001		Wo	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. FEI Number Applied For		or~~ -	
City & State		City & State			03-0411241 Not Applicab			
Zip	Country	Zip	Coun	try	6. CERTIFICATE	E OF STATUS DESIRED	S8.75 Additional Fee red for a Certificate of Sta	
7. Names	and Street Addresses of Each Officer and	or Director (Flo	rida nonprofit corpo	rations must list at lea	ast 3 directors)			
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip		
PD	AZOCAR, CLAUDIO		4633 NW 94TH PLACE			MIAMI FL 33178		
ST	CHACON, IGNACIO		4633 NW 94TH	PLACE		MIAMI FL 33178		
					30	005383	2783/	
7					10/15/	103010870 	04 ***255.75	
·						1		
<u> </u>	8. Name and Address of Current	_ 			nd Address of New Registered Agent			
AZOCAR, CLAUDIO 4633 NW 94TH PLACE				Name Street Address (P.O. Box Number is Not Acceptable) Suite Ant # Etc				
MIAMI FL 33178				Suite, Apt. #, Etc.				
				City			State Zip Code	
10. I, being	appointed the registered agent of the abo	ove named corpo	oration, am familiar v	with and accept the of	bligations of Secti	ion 607.0505, F.S. or 6	17.0505, F.S.	
Signature o Registered	Agent	EGISTERED AG	ENT MUST SIGN	· · · · · · · · · · · · · · · · · · ·		Date	10/03	_

11. I certify that of 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

SIGNATURE:

ID THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.



To:

Division of corporations

Annual Report/Reinstatement Section

From:

Claudio Azocar

Extreme Security Networks

Date:

10/10/03.



Matter:

UBR Filing (Not received)

My name is Claudio Azocar and I am the president of Extreme Security Networks, Corp. Today I was very surprised to receive this notice of dissolution or revocation because I clearly remember that about a week after I included Ignacio Chacon into my corporation, I sent the UBR filing including Ignacio as our new Secretary. It is my first time doing this so I never expected that this could happen (next time I'll certify the form), nevertheless at this time I don't have a way to prove to you the fact that I mailed the UBR.

As per my conversation today with the Division of Corporations, I'm sending this letter requesting the reinstatement of my corporation, so I can carry on with my business. Thank You in advance for your collaboration and support.

<u>Note:</u> Attached with this letter is a check for \$558.75 Dollars to cover fees and status certificate as requested.

Sincerely,

Zaudio Azocar

President

Contact Information:

Extreme Security Networks Corp.

<u>cea@ExtremeSNet.com</u> Cellular: (305) 986-6948 Office: (305) 436-2804