1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

02-03 4BR

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 FEB 14 AM 9:59

DOCUMENT # P01000115463

1. Corporation Name
All American Alarm, Inc.

2. Principal Office Address	3. Mailing Office Address
2506 Second St	2506 Second St
Suite, Apt. #, etc.: #208	Suite, Apt. #, etc.: #208
City & State: Ft. Myers, Fl	City & State: Ft. Myers, Fl
Zip: 33901 Country: USA	Zip: 33901 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/06/2001

5. FEI Number: 36-4486163 ☐ 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: Eva L. Ali

~~01/30/03 01078 002 **30.00~~

Street Address (P.O. Box Number is Not Acceptable): 301 N.E. 19th Place

800011406098
01/30/03--01078--002 **30.00

Suite, Apt. #, Etc.:

City: Cape Coral | State: FL | Zip Code: 33909

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 _____ Date _____

REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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
Pres	Eva L. Ali	301 NE 19th Place	Cape Coral, Fl 33909

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: Eva Ali

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/03 239-334-7447
Date Daytime Phone #

2/14/03

2

ALL AMERICAN ALARM, INC.
2506 Second Street #208
Fort Myers, Florida 33901
PH: 239-334-7447 FAX: 239-334-1213

February 6, 2003

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

Re: Reinstatement

Attn: Andy Dunlap

Per your letter dated February 3, 2003, be advised that the UBR was not received by All American Alarm, Inc., as well as my Accountant not advising me that this was not received/filed.

Your consideration in this matter will be greatly appreciated.

Sincerely,

Eva L. Ali
President

Encl: AAA letter of 01/29/03
UBR reinstatement form
FDS letter of 02/03/03