

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 OCT 15 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000122244

1. Corporation Name Business Solutions Unlimited USA, Inc.

2. Principal Office Address

27313 Hollybrook Trail

Suite, Apt. #, etc.

N/A

City & State

Wesley Chapel, FL

Zip

33543

Country

USA

3. Mailing Office Address

27313 Hollybrook Trail

Suite, Apt. #, etc.

N/A

City & State

Wesley Chapel, FL

Zip

33543

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12-27-2001

5. FEI Number

59-3760420

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

Neal Scoppet Huolo

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

27313 Hollybrook Trail

Suite, Apt. #, Etc.

City

Wesley Chapel

State

FL

Zip Code

33543

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

Neal Scoppet Huolo

Date 10-9-03

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
DP	Neal Scoppet Huolo	27313 Hollybrook Trail	Wesley Chapel, FL 33543
DV	Carlton Dunko	5312 Villagebrook Dr	Wesley Chapel, FL 33543
DS	Antoinette Scoppet Huolo	10816 Collier Dr	San Antonio, TX 78216
DT	Eugene Scoppet Huolo	1602 Poplar Glenn Ct	Sunnyvale, CA 94086

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:

Carlton Dunko

Carlton Dunko

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-9-03

Date

813-376-0719

Daytime Phone #

CR2E081 (10/02)



"the only cost is NOT calling"

10-10-2003

To Whom It May Concern:

I spoke with a wonderful lady in your offices on Thursday October the 9th about what we needed to do to reinstate our corporation. Apparently after we moved from our last location our forwarding from the post office had expired resulting in BSU never receiving any correspondence from the State. When I explain this she replied that it was noted that the mail was returned "undeliverable".

She told me to download the form and send it in with a check for \$150.00 that they would waive the reinstatement fee due to the mail being returned. She also suggested that if I needed it recorded earlier to send it to one of the corporation services companies and that they would hand deliver it and the state would then file it within 24 hours.

If you have any questions please call me 800-373-1038

Sincerely & Appreciatively


Carlton DeWayne Dunko
Vice President