

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000021001

1. Corporation Name

AMAZE! TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

2900 BELMAR STREET

FORT LAUDERDALE

FL 33304

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/25/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

04-3662232

App

Not

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PD	BALL, PATRICIA	2900 Belmar Street	Ft. Lauderdale FL 33304

000029030780
02/18/04--01054--009 **158.75U000000026443
02/03/04--80009--009 150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

Patricia Ball

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

2900 Belmar Street

Suite, Apt. #, Etc.

City

Ft Lauderdale

State

FL

Zip Code

33304

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.

Signature of
Registered Agent

Patricia Ball

REGISTERED AGENT MUST SIGN

Date 01/31/2004

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.Yes ☐ No ☒(See other side for information
on intangible tax.)

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

SIGNATURE:

Patricia Ball

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/21/2004

Date

954-564-0523

Daytime Phone

January 31, 2004

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Re: Amaze! Technologies Inc

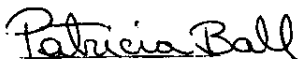
To Whom It May Concern:

Since I moved from Panama City to Fort Lauderdale in 2003, I never received the
Annual report notice for 2003 and consequently never paid for the renewal.

I am enclosing my check of \$ 150.00 in order to renew my Corporation for 2003 and ask
you to send me the paperwork necessary for the 2004 renewal.

Thank you for your cooperation in this matter.

Sincerely,


Patricia Ball