

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000030873

1. Corporation Name

UTEC, INC.

Principal Place of Business

Mailing Address

9572 NW 41 ST
MIAMI FL 33178

9572 NW 41 ST
MIAMI FL 33178

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

2. New Principal Office Address, If Applicable
5083 NW 116 AVE

3. New Mailing Office Address, If Applicable
5083 NW 116 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State MIAMI, FL

City & State MIAMI, FL

Zip 33178 Country USA

Zip 33178 Country USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/20/2002

5. FEI Number

02-0568184

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	MERIN, JOHN	0572 NW 41 ST	MIAMI FL 33178
P	Meritt, John	5083 NW 116 AVE	Miami FL 33178

500023965915
10/21/03--01040--029 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MERITT, JOHN
9572 NW 41 ST
MIAMI-FL 33178

Name

MERITT, JOHN

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

5083 NW 116 AVE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33178

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. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

X 10/13/03

11. 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:

[Signature]

JOHN MERITT

X 10/13/03

X (305) 360-2878

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20040 (7/03)

20f2

YESIT J. CAMPO, PA
CERTIFIED PUBLIC ACCOUNTANT

October 15th, 2003

Department of State
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Fl. 32314

Ref.: Document # P02000030873
FEI Number 02-0568184
Utec, Inc.

To Whom It May Concern:

The purpose of this letter is to inform you that the 2003 Annual Report for the above referenced client is being sent late due to the fact that my client never received the Annual Report Form and misunderstood that he did not have to file this report.

I would like to request the abatement of penalty for not filing this report on time. I have enclosed the application along with \$150.00 payment for the year 2003.

Please accept the application and payment, and my client will make sure that this incident does not happen again. My client and I deeply apologize for this oversight.

Thank you in advance for your patronage and prompt assistance.

Sincerely,

Yesit J. Campo, CPA