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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P02000047789					
1. Corporation Name Xenomics, Inc.					
2. Principal Office Address 420 LEXINGTON AVE.			3. Mailing Office Address 420 LEXINGTON AVE.		
Suite, Apt. # etc. Suite 1701			Suite, Apt. # etc. Suite 1701		
City & State New York, NY			City & State New York, NY		
Zip 10170	Country USA	Zip 10170	Country USA	4. Date Incorporated or Qualified To Do Business in Florida 4/26/2002	
5. FEI Number 04-3721895				Appreciated For Non Applicable	
6. CERTIFICATE OF STATUS REQUIRED ☒				7. Audit of prior year's income tax required ☐	
7. Name and Address of Current Registered Agent					
Name CT Corporation System					
Street Address (P.O. Box Number is not acceptable) 1200 South Pine Island Rd.					
Suite, Apt. # Etc.					
City Plantation					
State FL		Zip Code 33324			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.					
Signature of Registered Agent Stefania Rocco		Stefania Rocco Vice President		Date 07/16/05	
9. Names and Street addresses of Each Officer and/or Director (Florida not-for-profit corporations must list at least 3 directors)					
TIME	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City/State/Zip	
P	V. Randy White	420 XENOMICS, INC. #1701 420 LEXINGTON AVE.		NY, NY 10170	
T	Bernard Denoyer	" "		" "	
C	L. David Tomei	" "		" "	
D	Tom Adams	" "		" "	
D	Donald Picker	" "		" "	
D	Gabriele M. Cerrone	" "		" "	
10. I certify that I am an officer or director of the corporation or trustee empowered to execute this application as provided for in chapters 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 607.0601 or 617.0601 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)(b) 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: Michael Treasurer		Date 7/11/05 212-297-0808			
WITNESSED AND FILED ON BEHALF OF SECRETARY OF STATE					

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CT CORPORATION SYSTM

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Corporation Reinstatement

Xenomics, Inc.

9. Names and Street Addresses of Each Officer and/or Director (continued)

P	Samuil Umansky	c/o Xenomics, Inc. 420 Lexington Avenue, #1701	NY, NY 10170
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Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

XENOMICS, INC.

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