


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P02000054787			
1. Corporation Name CYPLEX HOLDINGS INCORPORATED			
2. Principal Office Address 2831 RINGLING BLVD. Suite, Apt. #, etc. SUITE 204-B City & State SARASOTA, FLORIDA Zip Country 34237-5350 USA		3. Mailing Office Address Suite, Apt. #, etc. City & State Zip Country	

REINSTATEMENT 03-04

4. Date Incorporated or Qualified To Do Business in Florida JUNE 26, 1992	
5. FEI Number 65-0377358	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name JOHN R. FLANAGAN	
Street Address (P.O. Box Number is Not Acceptable) 2831 RINGLING BLVD.	
Suite, Apt. #, Etc. SUITE 204-B	
City SARASOTA	State Zip Code FL 34237

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

John R. Flanagan
REGISTERED AGENT MUST SIGN

Date

3/11/04

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
PD	LOIS V. CYBALSKI	1205 RIVERBANK DRIVE	CAMBRIDGE, ONT. N3H 4R6
D	JOHN R. FLANAGAN	2831 RINGLING BLVD. STE. 204-B	SARASOTA, FL 34237-5350

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:

John R. Flanagan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/04
Date

941-3663846
Daytime Phone #

CR2E081 (10/02)

January 14th, 2004
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILE COPY

To Whom It May Concern:

I mailed a second notice report for 2003 with a letter stating I never received the letter of first notice report last year for Cyplex Holdings Inc. A check for \$150.00 dated July 14th, 2003, check # 498 with the Bank of America, Document # PO 2000054787, was cashed however. I would like the late fees to be waived please. I received no further correspondence regarding this Company so was very surprised that it was dissolved upon trying to file for this current year 2004.

Enclosed find a check for Cyplex Holdings for \$150.00 for 2004 filing.

Please find enclosed a copy of the letter and check dated July 14th, 2003.

Trusting this will be resolved immediately. Thanking you in advance for taking care of this matter.

Sincerely



Lois Cybalski
Director/ Cyplex Holdings Inc.
1205 Riverbank Drive
Cambridge, Ontario
Canada, N3H 4R6
519-650-1010
Ontario Mailing Address and Phone Number