

PLEASE READ ALL INSTRUCTIONS BEFORE COME

APPROVED  
AND  
FILED

05 APR 18 PM 12:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P02000072075**

1. Corporation Name

**HIGH TECH CONTRACTORS INC**

2. Principal Office Address

7955 NW 12TH STREET

Suite, Apt. #, etc.

SUITE 400

City & State

DORAL, FL

Zip

33126

Country

USA

3. Mailing Office Address

7955 NW 12TH STREET

Suite, Apt. #, etc.

SUITE 400

City & State

DORAL, FL

Zip

33126

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

04-3695751

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

MYRIAM ESPINAL

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

7955 NW 12TH STREET

Suite, Apt. #, Etc.

SUITE 400

City

DORAL

State

FL

Zip Code

33126

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

*Myriam Espinal*

REGISTERED AGENT MUST SIGN

Date

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
PSTD	MYRIAM ESPINAL	7955 NW 12. STREET STE 400	DORAL, FL 33126

900054124669  
05/10/05--01008--017 \*\*450.00

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:

*Myriam Espinal*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/05)

292

HIGH TECH CONTRACTORS INC  
7955 N.W. 12<sup>TH</sup> ST STE 400  
MIAMI, FL 33126

**Doc. #P02000072075**

April 14, 2005

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

To Whom It May Concern:

The purpose of this letter is to let your office know that as of today I have not received the Annual Report form for my corporation for the year 2003, 2004, and 2005. I notice that my corporation was inactive because when I went to the bank to open a bank account they told me that the corporation was inactive and needed to be active in order to open a bank account. As of today, I've never received any notification to renew my corporation. Today, I called someone at your office and I was to write a letter explaining what had happened. She also told me to download a reinstatement form and attached a check for \$450.00 (\$150 for every year). I'm sending all of the documents along with the check to your office the way I was instructed by your office. I ask that you please waive the late penalties that are being charged. If you need further information regarding this matter please, do not hesitate to contact me at your earliest convenience.

Thank you,



Myriam Espinal  
President