

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

08 NOV 25 AM 11:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000090991

1. Corporation Name

Cernix Technologies International Inc.

2. Principal Office Address

3004 Hartridge Ter

Suite, Apt. #, etc.

City & State

Wellington, FL

Zip
33467

Country
USA

3. Mailing Office Address

3004 Hartridge Ter

Suite, Apt. #, etc.

City & State

Wellington, FL

Zip
33467

Country
USA

000138266800

11/25/08--01033--018 **1050.00

REINSTATEMENT

06-08

**4. Date Incorporated or Qualified
To Do Business in Florida** 8/21/2002

5. FEI Number

13-4208990

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 Faisal Haidar

Street Address (P.O. Box Number is Not Acceptable)
3004 Hartridge Ter

Suite, Apt. #, Etc.

City Wellington

State
FL

Zip Code
33467

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

Faisal Haidar

REGISTERED AGENT MUST SIGN

Date 11/17/2008

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 |
|--------|--------------------------------------|---|----------------------|
| Dir. | Faisal Haidar | 3004 Hartridge Ter | Wellington, FL 33467 |
| Pres. | Faisal Haidar | 3004 Hartridge Ter | Wellington, FL 33467 |
| VP | Faisal Haidar | 3004 Hartridge Ter | Wellington, FL 33467 |
| Sec. | Faisal Haidar | 3004 Hartridge Ter | Wellington, FL 33467 |
| Treas | Faisal Haidar | 3004 Hartridge Ter | Wellington, FL 33467 |
| | | | |

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

Faisal Haidar

Faisal Haidar, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/17/2008

Daytime Phone #

CR2E081 (8/01)

11/25/08