

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

03 OCT 16 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000119010

1. Corporation Name

APOLLO TECHNOLOGY SOLUTIONS, INC.

Principal Place of Business

Mailing Address

1797 PINE BAY DR
LAKE MARY FL 32746

1797 PINE BAY DR
LAKE MARY FL 32746

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/06/2002

5. FEI Number

05-0538262

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	DI PAOLO, MICHAEL	1797 PINE BAY DR	LAKE MARY FL 32746
ST	DI PAOLO, DR. PETER T	1797 PINE BAY DR	LAKE MARY FL 32746

500023863375
10/16/03--01087--006 **150.00

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

9. Name and Address of New Registered Agent

Name Micheal DiPaolo
Street Address (P.O. Box Number is Not Acceptable)
1797 PINE Bay Drive
Suite, Apt. #, Etc.
City Lake Mary State FL Zip Code 32746

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

Micheal DiPaolo
REGISTERED AGENT MUST SIGN

Date 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:

Micheal DiPaolo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/03 407-688-7046
Date Daytime Phone #

CR2E040 (7/03)

APOLLO TECHNOLOGY SOLUTIONS INC.

■ 1797 Pine Bay Drive
■ Lake Mary, FL 32746
■ 407-688-7046
■ mdp@apollotsi.com

October 13, 2003

RE: Waiver of Reinstatement Fee penalty for Apollo Technology Solutions, Inc. (Doc # P02000119010)

Florida Department of State
Divisions Of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern,

This letter is to cordially request a waiver of the \$600 reinstatement penalty fee for Apollo Technology Solutions Inc. due to failure to receive prior UBR filing notifications. The corporation did not receive any notices and/or reminders to file the UBR from the State of Florida Division of Corporations or the Registered Agent. Failure to file the UBR was an oversight as a result of not receiving proper notification, and was not intentional.

Your consideration in this matter is greatly appreciated. I've included this letter, along with my filing fee of \$150 with the reinstatement paperwork. Please feel free to contact me at 407-688-7046 if you have any questions.

Sincerely,



Micheal DiPaolo

President

Apollo Technology Solutions, Inc.