PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION FLORIDA DEPARTMENT OF STATE								FILED			
KCINSTATEMENT					Secretary of State sion of corporations			08 SEP -8 PM 2: 01			
DOCUMENT # P04000108227								}	GLUMLTARY OF STATE TALLAHASSEE, FLORIDA		
1. Corporation Name											
DF Technology, Inc.								10/07	00136691916 70801021001 **600.00		
~> ₈₀								10,01	100 01021 001 1100100		
2. Principal Office Address - No P.O. Box # 3. Mailing O								Being.	TATEMENT 20105-08		
72000112101110					NE 13th Ave				CR2E081 (12/07/05 - 08		
Suite, Apt. #, etc. Suite, Apt. #,					etc.			4. Date Incom	porated or Qualified		
Ste #200 Ste #200 City & State City & State									ness in Florida 07/21/2004		
'					Florida			5. FEI Numbe			
Zip	<u> </u>			N Miami, Florida			try		399552 Not Applicable		
33161				33161				6. CERTIFICATE	S8.75 Additional Fee required for a Certificate of Status		
7. Name and Address of Current Registered Agent											
Name Frantz Maurissin									einstatement fee is imposed, except in		
Street Address (P.O. Box Number is Not Acceptable)							circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not				
12355 NE 13th Ave Suite, Apt. #, Etc.											
Ste #200									received and requesting the reinstatement fee be waived.		
City N Miami						State Zip Code State Zip Code Zip Cod					
8. I, being appointed the registered agent of the above named corporation, and familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.											
Signature of Registered Agent UVUL									Date 9/04/08		
REGISTERED AGENT MUST SIGN									5410		
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				10 6 City / State / Zip		
DP	Frantz Maurissin				12355 NE 13th Ave, Ste #200			200	N Miami, Florida 33161		
D	Sony Perpignan Jr.				271 N.W. 146th St.				Miami, FL 33168		
D	Schiller Leconte				17001 NE 9th Ave #14B				N Miami, Florida 33162		
D	Jean O Clermont				142 E Riverbend Dr				Sunrise, FL 33326		
D	Calix Sa			7320 NW 44th Ct				Lauderhill, FL 33319			
D	Markk C			7320 NW 44th Ct				Lauderhill, FL 33319			
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 contained in Chapter 119, 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: Frantz Maurissin, President 9/04/08 (305) 439-4760 SIGNATURE: Date Day PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #											