

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 SEP -3 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P17793

1. Corporation Name

Lockwood & Holmes, Inc

2. Principal Office Address

IEC
2201 Dupont Drive

Suite, Apt. #, etc.

Suite 800

City & State

Irvine, CA

Zip

92612

Country

USA

3. Mailing Office Address

IEC
2201 Dupont Drive

Suite, Apt. #, etc.

Suite 800

City & State

Irvine, CA

Zip

92612

Country

USA

REINSTATEMENT 03-04
10/21/03 01130 027 \$750.00

4. Date Incorporated or Qualified
To Do Business in Florida

April 11, 1972

5. FEI Number

581147879

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

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

000040845620
09/08/04--01022--005 **150 00

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

See attached

Date

9/21/04

REGISTERED AGENT MUST SIGN

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
C	Patrick DeCoursey	2201 Dupont Drive, #800	Irvine, CA 92612
D	Janis Paulson	2201 Dupont Drive, #800	Irvine, CA 92612
D	Myra Dembiec	2201 Dupont Drive, #800	Irvine, CA 92612

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:

Patrick DeCoursey

Patrick DeCoursey 9/1/04 949-794-9999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR25081 (01/04)

AGENT AFFIDAVIT AND ACKNOWLEDGEMENT OF ACCEPTANCE

I hereby acknowledge and accept the appointment of registered agent(s) for and on behalf of Lockwood Holmes Inc.

Corporation Service Company

Registered Agent(s)