

FEB. -11' 03 (TUE) 04:12

CSC TALL

P.002

FROM :JBIZ TECHNOLOGY

FAX NO. :6234929521

Feb. 11 2003 01:00PM P1

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

AM 10:59

H030000497625

TALLAHASSEE, FLORIDA

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000026209

1. Corporation Name

IBIZ TECHNOLOGY CORP

2. Principal Office Address

2238 W. Long Cactus RD

Suite, Apt. #, etc.

200

City & State

Phoenix, Arizona

Zip

85027

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 02-03

4. Date Incorporated or Qualified
To Do Business in Florida

4/6/94

5. FEI Number

86-0392088

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐807- 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

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0605 or 817.0803, F.S.

Signature of
Registered Agent*Cynthia L. Harris*Cynthia L. Harris
as its agent

Date

2/11/03

REGISTERED AGENT MUST SIGN

9. Name and Street Address of Each Officer and/or Director (Florida non-profit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO	Kenneth W. Schilling	8512 W. Via Montoya	Peoria, AZ 85383
EVP	Mark Perkins	25213 N. 47th Drive	Glendale, AZ 85310

10. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 807 or 817, 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 807.0401 or 817.0401, 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:

Kenneth W. Schilling

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/03

Date

623-992-9200

Daytime Phone #

as per conversation w/ Aetha CSC 2-12-03

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FEI #

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Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 521-1030

CORPORATION REINSTATEMENT

IBIZ TECHNOLOGY CORP.

Certificate of Status	0
Certified Copy	0
Page Count	12
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