

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Katharine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000075115

1. Corporation Name

DYNAMIC LABORATORY, INC.

Principal Place of Business

Mailing Address

1495 S VOLUSIA AVE
STE 101
ORANGE CITY FL 32763
US

1495 S VOLUSIA AVE
STE 101
ORANGE CITY FL 32763
US

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

10/07/1994

5. FEI Number

59-3281084

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	CHAUDHARI, GOVIND	1495 SOUTH VOLUSIA AVENUE, STE.	ORANGE CITY FL
			LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CHAUDHARI, GOVIND
1495 S. VOLUSIA AVE STE 201
ORANGE CITY FL 32763

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 10-15-01

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DYNAMIC TESTING & ENGINEERING, INC.

CONSULTING ENGINEERS
CIVIL - ENVIRONMENT - GEOTECHNICAL - MATERIALS TESTING

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October 15, 2001

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE : Dynamic Testing & Engineering Corp. (# 585389)
Dynamic Laboratory, Inc. (# P94000075115)
Jasmir Management, Inc. (# P96000099694)

Dear Sir/ Madam :

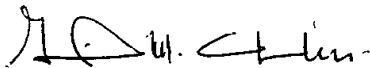
This is in reference to the 2001 Corporation annual reports / UBR for the above-mentioned corporations.

We received the notice of administration dissolution for all 3 corporations only last week. We had not received the first notices for the same.

Therefore, we request you to re-instate the corporations. A check in the amount of \$ 450.00 has been enclosed.

Thank you for your help in this matter.

Sincerely,



Govind M. Chaudhari, P.E.
GMC : NR