2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED DOCUMENT # P95000013732 2001 NOV 30 PM 12: 30 INTEGRATED ELECTRONIC INTERIORS, INC. SECRETARY OF STATE TALLAHASSEE.FLORIDA Principal Place of Business Mailing Address 120 WEST CROWN POINT RD 120 WEST CROWN POINT RD **SUITE 106** SUITE 106 WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt # etc Suite, Apt. #, etc. 10172007 REIN-P CR2E098 (1/07) City & State City & State 4. FEI Number Applied For 59-3302477 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUFF, ANIKA S Street Address (P.O. Box Number is Not Acceptable) 120 WEST CROWN POINT RD **STE 106** WINTER GARDEN, FL 34787 Zip Code 8. The above named entity sybmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of register 11/10/137 **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) to be wanted FILE NOW!! FEE IS \$750.00 After January 1, 2006, Fee will be \$900.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS ☐ Change D HILE ☐ Delete TITLE RUFF, ANIKA S NAME NAME 9216 LAKE FISCHER BLVD STREET ADDRESS STREET ADDRESS **GOTHA, FL 34734** CITY-ST-ZIP CITY-ST-ZIF THLE ☐ Delete ☐ Change ☐ Addition RUFF, PHILLIP C NAMÉ NAME STREET ADDRESS 9216 LAKE FISCHER BLVD STREET ADDRESS CITY-ST-ZIP **GOTHA, FL 34734** CITY-ST-ZIP Delete ☐ Channe ☐ Addition THE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE [7] Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-S1-ZIP CITY-ST-ZIP Delete ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition THEF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an adjaness, with all other like empowered.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR



Nov 26th, 2007

Michelle Milligan Documents Specialist Supervisor Dept of State Div. of Corporations PO Box 6327 Tallahassee, FL 32314

RE:FEIN # 59-3302477

Dear Michelle,

I am writing to reinstate our corporation. It seems we never received the notices for Integrated Electronic Interiors, Inc but we did receive the renewal for another company, APRuff at our same address that we sent in thinking is was for Integrated Electronic Interiors. We did not wish to renew the APRuff but I do understand that once the money is applied it can not be changed.

I am asking to waive the reinstatement fees of \$600 and am enclosing \$150 for our filing. I tried to do this on line and the system froze several times.

Please call me anytime with questions.

Most Sincerely,

Integrated Electronic Interiors, Inc

Anika Ruff, It's President