PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 DEC -2 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000023431

1. Corporation Name
Multi-Dimensional Solutions, INC.
8015 Cardinal Drive
Tampa, Florida 33617

CR2E081 (8/05)

2. Principal Office Address	3. Mailing Office Address
6926 N. 53rd st.	8015 Cardinal Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Tampa, Fla.	Tampa, Fla.
Zip: 33617 Country: US	Zip: 33617 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: 11-29-95

5. FEI Number: 59-3344230 ☐ 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

REINSTATEMENT 04-05

Name: Reginald A. Earl

Street Address (P.O. Box Number is Not Acceptable): 6926 N. 53rd st.

Suite, Apt. #, Etc.

City: TPA. State: FL Zip Code: 33617

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: Reginald A. Earl Date: 11-29-05
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
P	Reginald A. Earl	6926 N. 53rd st.	Tpa. Fl. 33617
VP	Roberta A. Earl	8015 Cardinal Dr.	Tpa. Fl. 33617
CEO/D	Evelyn Taylor	8015 Cardinal Dr.	Tpa. Fl. 33617

000061915550
12/05/05--01068--016 **900.00

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 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: Evelyn Taylor / Evelyn Taylor 11-29-05 813-985-5283
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

15292

November 30, 2005

To: Dept. of State
Div. of Corporations
Clifton Building
2661 Executive Center Circle

From: multi-Dimensional Solutions, INC.
8015 Cardinal Dr. Attention: Evelyn Taylor
Tampa, Fl. 33617

Attention: Tina Roberts

Dear ms. Roberts,
I would like the coparation, multi-Dimensional Solutions, Inc. reinstated. The corporation didn't receive the information for the year renewal, from 2000 to present, at 8015 Cardinal Dr. Tampa, Fl. 33617. Enclosed please find a check in the amount of $900.00 for the reinstatement fees. Also enclosed, please find a US mail, Priority mail package for the return. Any questions please give me a call at 813-985-5293.
Thank you.

Sincerely,
Evelyn Taylor - 813-985-5293