

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **P95000035598**

1. Corporation Name

BIODATA INTERNATIONAL INC.

97 FEB -4 AM 10:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**3816 DESOTO BLVD.
PALM HARBOR FL 34683**

**3816 DESOTO BLVD.
PALM HARBOR FL 34683**



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
225 E. Robinson Street

3. New Mailing Office Address, If Applicable
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 450

City & State
Orlando, Florida 32802-1273

City & State

Zip

Country

Zip

Country

32802-1273

USA

4. Date Incorporated or Qualified
To Do Business in Florida

05/01/1995

5. FEI Number

☒ Applied For

☐ Not Applicable

Applied For

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
TD	GRUNBERG, ARCHIM	Auf der Nuer 26	53578 Windhagen, Germany
PS	Dunegan, Richard	225 E. Robinson Street Ste. 450, Orlando, Fl.	Orlando, Florida 32802-1273

REINSTATEMENT

1996-97

J. Alan

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DUNEGAN, RICHARD ESQ.

225 EAST ROBINSON STREET

ORLANDO, FLORIDA

225 East Robinson Street, Ste. 450

Orlando, Florida 32802-1273

Name

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

Suite, Apt. #, Etc.

City

100002080791--2

-02/06/97--01130--003

*****915.00 FL ***915.00**

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

1/13/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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 #

1/13/97

CR2E040 (7/96)