CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 APR -7 AM 7: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

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04/05/04--01056--004 **300.00

DOCUMENT # P95000037358

1. Corporation Name

Info/SIS Technologies Corporation

2. Principal Office Address
100 Almeria Avenue

Suite, Apt. #, etc.
Suite 230

City & State
Coral Gables, FL

Zip	Country
33134	Dade

3. Mailing Office Address
100 Almeria Avenue

Suite, Apt. #, etc.
Suite 230

City & State
Coral Gables, FL

Zip	Country
33134	Dade

4. Date Incorporated or Qualified To Do Business in Florida   05/11/1995

5. FEI Number 65-0580624	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

Name   Jeannie Cruz

Street Address (P.O. Box Number is Not Acceptable)   100 Almeria Avenue

Suite, Apt. #, Etc.   Suite 230

City Coral Gables	State FL	Zip Code 33134

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 _____   Date   3/30/04

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	Jeannie Cruz	100 Almeria Avenue, Suite 230	Coral Gables, FL 33134

10. 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: _____   3/30/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E081 (10/02)

March 25, 2004

Uniform Business Report
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Info/Sis Technologies Corporation
Document #: P95000037358
Annual Report Filing 2003

Dear Sir or Madam:

This letter is regarding the reinstatement for Info/Sis Technologies Corporation. It has been brought to our attention that our client has not received an annual report. After speaking with a representative at the Department of State we came to the conclusion that an incorrect address is on file with the State. Our client was not able to locate the original Uniform Business Report Filing that was mailed to the incorrect address. Please find enclosed a check in the amount of $300.00 for the reinstatement of the above mentioned corporation. We are requesting that the penalties and interests for late filing of the Annual Report be abated due to this misunderstanding.

Please up date your records to reflect the correct address as follows:

Place of Business: 100 Almeria Avenue   Mailing Address: 100 Almeria Avenue
                   Suite 230   Suite 230
                   Coral Gables, FL 33134   Coral Gables, FL 33134

If you have any questions, please feel free to contact me. Thank you in advance for your prompt attention regarding this matter.

Sincerely,
GARCIA, ESPINOSA, MIYARES & CO, LLP.

Terry Reyes
For the Firm