| PLEASE READ ALL INSTRUCTIONS | BEFORE COMPLETING THIS FORM. |
|--|--|
| APPLICATION FOR REINSTATEMENT FOR REINSTATEMENT | FILED |
| Om C | 99 FEB - 9 AM 8: 46 |
| DOCUMENT # \$\int 95000 38569\$ 1. Corporation Name | SECRETARY OF STATE TALLAHASSEE. FLORIDA |
| Securtech of TAMPA BAY I | .nc., |
| Principal Place of Business Mailing Address | <u>-</u> |
| 948) HIGHRAND OAK Dr # 1011 | 5000027713150 |
| TAmpa P1A 33647 If above addresses are incorrect in any way, line through incorrect information and enter of | -02/10/9901042003 ****665.00 ****665.00 |
| 2. New Principal Office Address, If Applicable 948/ * Hichiano Oak ok Sine Apt. #, etc. Suite, Apt. #, etc. | |
| THIOI) City & State City & State | 5 FEI Number Applied For Not Applied be |
| TAMPA F/A Zip Country Zip Country | 6. |
| 33647 Hillsboragh | CEHTIFICATE OF STATUS DESIRED for a Certificate of Status |
| | eet Address of Each |
| 1 2 3 (Do NOT Us | cer and/or Director City / State / Zip e Posl Office Box Numbers) 4 |
| Pres. John Bergrein 4481 HIGHLAND DAK OR TAMPA AA 3364) | |
| pres Amanda BERGREN 9481 Highnand OAK DR. TAMPA FIA 3364) | |
| 8. Name and Address of Current Registered Agent | 9. Name and Address of New Registered Agent |
| JOHN Bergren | Name 88 |
| GYRI HIGHLAND DAK DR HIOH | Name 88 87 Street Address (P.O. Box Number is Not Acceptable) 80 80 80 80 80 80 80 80 80 80 80 80 80 |
| TAMPA FIA 83647 | Suite, Apt. #, Etc |
| | City Stale Zip Code |
| 10. I, being appointed the registered agent of the above named corporation, am familiar with | th and accept the obligations of Section 607.0505, F.S. |
| Signature of Registered Agent Date 1-29-99 REGISTERED AGENT MUST SIGN | |
| 11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes D No 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 local 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 individuals application is true and accurate, and my signature shall have the same legal effect as if made under oath. | |
| SIGNATURE: JOHNATHAN & BERGARIN DE BURGARIN Date Date 29-99 (8/3)991-6004 | |

SECURETECH INC.

9481 HIGHLAND OAK DR. ~ #1011 ~ TAMPA FLA. 33647 Phone 1-888-698-8814 ~ Fax 813-991-7868

FEBRUARY 1, 1996

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE FL. 32314

300002765013---1 -02/04/99--01085--008 *****43.75 *****43.75

TO WHOM IT MAY CONCERN, I AM FILING AN APPLICATION FOR REINSTATEMENT, DUE TO OUR OWN NEGLIGENCE WE FAILED TO FILE FOR 2 YEARS IN A ROW. OUR COMPANY WAS DISSOLVED IN 1996 WE MOVED FROM 222 NEW HOPE RD. TO 9481 HIGHLAND OAK DR. TAMPA FL, 33647 AND NEVER RECEIVED ANY OF THE APPLICATIONS THEREAFTER. WE OUR SO SORRY PLEASE FORGIVE US AND REINSTATE OUR COMPANY, IN THE FUTURE THIS WILL NEVER HAPPEN AGAIN I CAN ASSURE YOU OF THAT.

THANK YOU SO MUCH,

JOHNATHAN BERGREN & AMANDA BERGREN PRESIDENT VICE PRESIDENT

IMPORTANT

WE WOULD LIKE TO HAVE 2 CERTIFICATE OF STATUS ON THE NEW CORPORATION NAME, WE ARE SENDING IN \$665.00 FOR THE LAST 2 YEARS AND 1999 RENEWAL, ANY QUESTIONS PLEASE CALL 813-991-6004 OR 813-973-7596. THANKS AGAIN.

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Hona

Cell (813) 625-0002

Fed Ex 235944537 Account #