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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV 17 PM 4:07

DOCUMENT # P95000068809

1. Corporation Name

Brenock Technology Inc.

REINSTATEMENT

97-06

CR2E081 (12/05)

2. Principal Office Address
5401 Collins Avenue

3. Mailing Office Address
5401 Collins Avenue

Suite, Apt. #, etc.
707

Suite, Apt. #, etc.
707

City & State
Miami Beach, Florida

City & State
Miami Beach, Florida

Zip
33140

Country
USA

Zip
33140

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida 09/07/1995

5. FEI Number 650605185

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
Manus Walsh

Street Address (P.O. Box Number is Not Acceptable)
5401 Collins Avenue

Suite, Apt. #, Etc.
707

City
Miami Beach, Florida

State
FL

Zip Code
33140

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 11/14/2006

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	Manus Walsh	5401 Collins Avenue, Ste. 707	Miami Beach, FL 33140

200081903179
11/17/06--01034--007 **1515.00

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 contained in Chapter 119, 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:

Manus Walsh

11/14/2006

305-898-4074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2007 2

BRENOCK TECHNOLOGY

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

November 14, 2006

Subject: Waiver of Reinstatement Fee

Dear Sir/Madam:

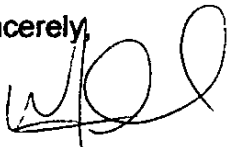
I recently discovered that my corporation, Brenock Technology, was listed as an inactive Corporation. I am requesting that the reinstatement fee be waived because I did not receive the annual report notice in 1997 my year of dissolution/revocation or any year thereafter.

I have continued to file all federal and state tax forms and well as maintaining an active occupational license. When I contacted your office and talked to an agent (Gary) he informed me that my corporate records with your office indicate the first notice in 1997 was returned. I moved address soon after my initial filing and I did not receive any annual report notices in 1997.

I have attached a check for \$1515 as confirmed by Gary to cover the total fees from 1997 until now.

Should you have any questions, please contact me at (305) 898-4074 or via e-mail at manus@brenock.com.

Sincerely,



Manus Walsh

Brenock Technology Inc
5401 Collins Avenue, Suite 707
Miami Beach, FL 33140