

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 JAN -5 PM 2:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000092670

1. Corporation Name

NATIONAL ELECTRONIC TECHNOLOGIES, INC.

Principal Place of Business

12249 S.W. 14TH LANE  
#1206  
MIAMI FL 33184-2869

Mailing Address

12249 S.W. 14TH LANE  
#1206  
MIAMI FL 33184-2869

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

2. New Principal Office Address, If Applicable

1701 NW 96 TERRACE

Suite, Apt. #, etc.

Apt. 1A

City & State  
PEMBROKE PINES, FL.

Zip  
33024

Country  
USA

3. New Mailing Office Address, If Applicable

1701 NW 96 TERRACE

Suite, Apt. #, etc.

Apt. 1A

City & State  
PEMBROKE PINES, FL.

Zip  
33024

Country  
USA

REINSTATEMENT 2000

4. Date Incorporated or Qualified  
To Do Business in Florida

12/06/1995

5. FEI Number

65-0629105

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	FLOR, DAVID	12249 S.W. 14TH LANE #1206	MIAMI FL 33184
PT	GARCELL, JORGE	9800 NW 10TH ST	PEMBROKE PINES FL 33024
V	VIDAL, JOSE	9800 NW 10TH ST	PEMBROKE PINES FL 33024
S	GARCELL, JOSE	9800 NW 10TH ST	PEMBROKE PINES FL 33024
			100003575451--3
			-01/25/01--01/03--014
			****750.00 ****750.00

8. Name and Address of Current Registered Agent

FLOR, DAVID  
12249 S.W. 14TH LANE  
#1206  
MIAMI FL 33184-2869

9. Name and Address of New Registered Agent

Name

JOSE GARCELL

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

1701 NW 96 TERRACE

Suite, Apt. #, Etc.

Apt. 1A

City  
PEMBROKE PINES

State

FL

Zip Code

33024

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

JOSE GARCELL

REGISTERED AGENT MUST SIGN

Date

1/3/2001

11. 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:

JOSE GARCELL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/3/2001 (954) 651-0629

Daytime Phone #

CR2E040 (8/00)