

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

01 JUL 25 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000000009

1. Corporation Name

QUIET TECHNOLOGY DC-8, INC.

2. Principal Office Address

2261 NW 67th Avenue

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33122

Country

USA

3. Mailing Office Address

P.O. Box 523726

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33152

Country

USA

REINSTATEMENT 00-01

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/29/95

5. FEI Number

65-0641616

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

BARRY H. FINE

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

2261 NW 67th Avenue

Suite, Apt. #, Etc.

Suite 214, Bldg. 700

City

Miami

State
FL

Zip Code
33122

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

4/27/01

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 |
|--------|--------------------------------------|---|--------------------|
| PD | Fine, Frank | 2261 NW 67 Ave BLDG. 700, STE. 214 | MIAMI, FL 33122 |
| VD | Fine, Barry H. | 2261 NW 67 Ave BLDG. 700, STE 214 | MIAMI, FL 33122 |
| D | Birbragher, Fernando | 12845 NW 45 AVE | OPALUCKA FL 33054 |
| | | | |
| | | | |
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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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/27/01 (305) 871-6606

Daytime Phone #

CR2E081 (9/00)