

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

CORPORATION

FLORIDA DEPARTMENT OF STATE
In the Office of the
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 OCT 20 PM 4:11

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P96000015612

1. Corporation Name

Skydash Technologies INC.

2. Principal Office Address

18181 NE 31ST CT

3. Mailing Office Address

18181 NE 31ST CT

Suite, Apt. #, etc.

902

Suite, Apt. #, etc.

902

City & State

Aventura

FL

City & State

Aventura

FL

Zip

33180

Country

USA

Zip

33180

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

2/20/96

5. FEI Number

65-0641812

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

Michael S. Jansen

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

18181 NE 31ST CT

Suite, Apt. #, Etc.

902

City

Aventura

State

FL

Zip Code

33180

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

Michael S. Jansen

Date

10/18/00

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
President	Michael S. Jansen	18181 NE 31ST CT #902	Aventura FL 33180

KE

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:

Michael S. Jansen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/18/00

Daytime Phone #

305-792-7553

CR2E081 (9/99)

To Whom it may Concern:

I never received notice that my Company was going to be

Administratively dissolved. In fact, I found out by accident

when I went online to check the name availability for a new

company.

Please reinstate my company, Skydish Technologies Inc. Please

Waive my extra fees & accept \$150 as payment for my Annual

fee.

Sincerely,

Michael J. Hansen
President

Skydish Technologies INC

Te/ 305/ 792-7553