

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JAN 22 AM 9:45

3000 GULF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000026382

1. Corporation Name

BURKHART ROENTGEN INTERNATIONAL, INC

2. Principal Office Address

5201 8TH AVE S

Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FL

Zip

33781

Country

USA

3. Mailing Office Address

5201 8TH AVE S

Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FL

Zip

33781

Country

USA

REINSTATEMENT 98-03

**4. Date Incorporated or Qualified
To Do Business in Florida** 03/25/96

5. FEI Number

59-3370182

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

MR. ANGEL F. HERNANDEZ

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

5201 8TH AVE S

Suite, Apt. #, Etc.

City

ST. PETERSBURG

State

FL

Zip Code

33781

01/08/03 01020 010

\$ 750.00

01/08/03 01020 009

\$ 750.00

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

REGISTERED AGENT MUST SIGN

Date 1-23-03

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
PRS	GEORGE D. BURKHART	5201 8TH AVE S	ST. PETERSBURG, FL 33781
VTD	RICHARD W. BURKHART	5201 8TH AVE S	ST. PETERSBURG, FL 33781

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.

Richard W. Burkhardt

SIGNATURE:

Richard W. Burkhardt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

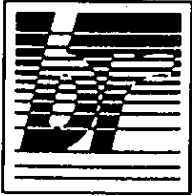
01/02/03

Date

727-327-6950

Daytime Phone #

CR2E081 (10/02)



Burkhart Roentgen International, Inc.

5201 8th Avenue South, St. Petersburg, FL 33707 U.S.A. • 727-327-6950
Toll Free: 1-800-USA-XRAY • FAX: 727-327-3255

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January 23, 2003

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

ATT: Mrs. Kathy Ashton

Dear Mrs. Ashton:

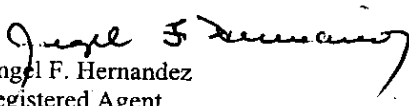
Thanks for the courtesy of your attention to our telephone call of today regarding Letters # 203A00001095 and #803A00001095 in reference to our wish to reinstall BURKHART ROENTGEN INTERNATIONAL, INC.

As per your very kind instructions, we are resubmitting the form to reinstall our company. As we discussed, it is not BURKHART ROENTGEN, INC. what we want to reinstall, but the company as described in the enclosed form.

We also discussed that our check # 1214 and 1215 in the amount of \$ 750.00 each must be applied towards this new reinstatement, and should disregard the application to reinstall XPRESS MEDICAL, INC temporarily. It is now very urgent for us the reinstatement of BURKHART ROENTGEN INTERNATIONAL, INC. as soon as possible.

Again, I wish to thank you very much for your valuable information, and please do not hesitate to contact us in the event additional information is needed.

Very truly yours,


Angel F. Hernandez
Registered Agent