

CAPITAL CONNECTION

850 222 1222

11/27 '00 14:40 NO.303 02/02

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

00 DEC -5 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000041761			
1. Corporation Name Unitech Industries Corporation			
2. Principal Office Address 7525 Northwest 37 Avenue Suite, Apt. #, etc.		3. Mailing Office Address Same Suite, Apt. #, etc.	
City & State Miami, FL 33147		City & State Same	
Zip 33147	Country U.S.A.	Zip Same	Country Same
4. Data Incorporated or Qualified To Do Business in Florida 5/15/96			
5. FE# Number 65-0666388		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 Dan Carmona			
Street Address (P.O. Box Number is Not Acceptable) 7525 Northwest 37th Avenue			
Suite, Apt. #, Etc.			
City Miami		State FL	Zip Code 33147
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 <i>Dan Carmona</i> Date 11/29/2000 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
D	Dan Carmona	7525 Northwest 37 Ave.	Miami, FL 33147
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 <i>Dan Carmona</i>		Dan Carmona	11/29/2000 (305) 594-8900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #