A P	LICATION BR A EMENT		EPARTAL MAR Matherine Brr Scretary C Sta ISION OF CORPORA	M		FILED	1. 20
DOCUMENT # P97000005					99 DEC - 1 PM 1:29 SECRETARY OF STATE TAGGAHASSEE, FLORIDA		
Principal Pla	AVIATION U.S.A., Ince of Business SOUTHWEST 147 PLA 1, FL. 33196	Mailing Addres	W99-2	25379			
If above addresses are incorrect in any way, line through incorrect information and enter correction below. New Principal Office Address, If Applicable 13395 SW 131 STREET					4. Date incorporated or Qualified To Do Business in Florida 01 - 03 - 97		
Suite Apt . etc City & State MIAMI, FLORIDA		Suite, Apt. #, etc. City & State			5. FEI Number	5. FEI Number Applied For 65 – 071 – 5731 Not Applicable 6	
Z _{IP} 33186	Country	Zip d/or Director (Flor	Country ida nonprofit corporati	ons must list at lea	CERTIFICATE	OF STATUS DESIRED .	Annual terror year and an entire section of the sec
* Title(s)	Name of Officers and/or Directors 2	Offic 3 (Do NOT Use	et Address of Each er and/or Director Post Office Box h	(Numbers)	Crty/Sta	10/Zp 3196	
PSTD	SINNARAJAH KUSHA			W 131 ST		MIAMI, FL. 3	
7	SIVANATHAN SIVAR	ASA	13395 SW 131 ST		, MARKET 11, 33130		
*				400003064564			
	8. Name and Address of Curre	nt Registered Age	ent		9. Name and	Address of New Registered	Agent
AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES, FL. 33134				Name Spiegel & Utrera, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 Almeria Avenue Suite, Apt. #, Etc.			
Signature	of By:		poration, am familiar w	th and accept the	oral Gabl		Zip Code 33134
11. Ti	his corporation owes that	ne current perty Tax d	year ue June 30.	Yes	No [(See other single on inta	de for information ngible tax.)
this re	fy that I am an officer or director or the reinstatement application, the reason for oby the corporation have been paid and s application is true and accurate, and m	dissolution has been the names of indiv	n eummated, the corp Iduals listed on this lo	m do not quality f	or an exemption U	hapter 907 or 617, F.S. I furthe its of section 607.0401 or 617.0 inder section 119.07(3)(i), F.S.	r certify that when filing 1401, F.S., that all fees The information indicated
SIGNA	ATURE:	<u>.</u>	SIVANATHA	-	.SA 30		KE 0-28-99 Daysime Phone #

HIE HOTHLING O'S'H'

OF:

AFFIDAYT IN SUPPORT OF REQUEST TO WAIVE THE FLORIDA DEPARTMENT OF STATE CORPORATE REINSTATEMENT FEES

STATE OF FLORIDA) COUNTY OF MIAMI-DADE)

- 1. Kushalakumari Sinnarajah is the President of NAT AVIATION USA, INC., a Flutida corporation, (hereinafter "Corporation").
- That the Corporation was administratively dissolved by the Florida Department of State on October 16, 1998.
- 3. That the Corporation failed to file its 1998 and 1999 Annual Report or pay the 1998 and 1999 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 3.1 the written notice and requirements for filing the Annual Report fact to the Florida Department of State was never received by the Corporation; and,
 - 3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a passedure to administratively dissolve the Corporation.
- 4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 1999 Annual Report fees and the filing of its 1999 Annual Report, which are presented simultaneously with this Affidavit.
- 5. NAT AVIATION USA, TNC. satisfies the requirements of the Florida Statutes 607.0401.
- No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: ____ day of November, 1999

FURTHER, AFFIANT SAVETH NOT

NAT AVIATION USA INC.

By: K. Zinn orejol.

Kushalakumari Smarajah, President

SWORN AND SUBJECTION before me this four of statement. 199

Notary Public, State of Florida at Large

Printed Name: ____

Commission Expires:

