PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. APPLICATION FLORIDA DEPARTMENT OF STATE Katherine Harris **FOR** FILED SECRETARY OF STATE VISION OF CORPORATIONS Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 99 OCT 19 AH 10: 50 P97000002264 DOCUMENT # 1. Corporation Name FILM TECHNOLOGIES INTERNATIONAL, INC. Principal Place of Business Malling Address 2544 TERMINAL DRIVE SOUTH 2544 TERMINAL DRIVE SOUTH ST. PETERSBURG FL 33712 ST. PETERSBURG FL 33712 REINSTATEMENT 95 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2 New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 01/09/1997 Suite Ant # etc. Suite Ant # etc. 5. FEI Number Applied For 59-3422874 City & State City & State Not Applicable \$8.75 A Discontraction require Zip Country Zip Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Officer and/or Director Title(s) and/or Directors City / State / Zip PS WHEELER, DONALD O 2544 TERMINAL DRIVE SOUTH ST. PETERSBURG FL 33712 VP MICHAUD, STEPHEN 2544 TERMINAL DRIVE SOUTH ST. PETERSBURG FL 33712 VP MIRO, FRANK 2544 TERMINAL DRIVE SOUTH ST. PETERSBURG FL 33712 900003043419--6 11/12/99--01120--009 \*\*\*\*750.00 \*\*\*\*750.00 0 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent WHEELER, DONALD O Street Address (P.O. Box Number is Not Acceptable) 2544 TERMINAL DRIVE SOUTH ST. PETERSBURG FL 33712 Suite, Apt. # Etc. City Zip Code 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 807.0506, F.S. WALL O. W. REGISTERED AGENT MUST SIGN Signature of Registered Agent # REGINED 11. 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 filling 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.

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