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DOCUMENT #	SECTION STATE			
tasseres Su	ystems, Inc.			
Principal Place of Business 12472 LAKE Under 1	Mailing Address			
Suite 201 Orlands, Fl 32626				
If above addresses are incorrect in any way, line thro 2. New Principal Office Address, If Applicable Suite, Apt *, etc.	ugh incorrect information and enter correction below 3 New Mailing Office Address, If Applicable Suite, Apt. # etc.	4 Date Incorporated or Qualified To Do Business in Bonda Tune 12, 1997		
City & State	City & State	5 FEI Number 59 - 35146		ilied For Applicable
Zip Country	Zφ Country	GERTIFICATE OF STATUS D	SIRED S8.75 Additional to for a Certificate	
7. Names and Street Addresses of Each Officer and/or Name of Officers and/or Directors P Anterro A. Grad	Street Address of Fr Officer and/or Direc 3 (Do NOT Use Post Office Bo	acti for x Numbers) 4	City / State / Zip Lo, FC \$2525	
V Sylvia L. Graha			SAME	
		-84.)2836704- /12/9901128(**300.00 ****3(00.00
8. Name and Address of Current F	Registered Agent Nagle	9. Name and Address of No	w Registered Agent	180
Antemo Graham 12929 Gwar Rivier Bl Orlando, FL 32525	(PO Blux Number is Not Accept LAKE Undash. 7/ A	State Zip Code	8	
10. 1, being appointed the registered agent of the above named dyporation and familiar with and accept the obligations of Section 607 0505, F.S. Bignature of Registered Agent REGISTERED AGENT MUST SIGN Principal Control of the above named dyporation and familiar with and accept the obligations of Section 607 0505, F.S. Principal Control of the above named dyporation and familiar with and accept the obligations of Section 607 0505, F.S.				F
This corporation owes the Intangible Personal Property		s 🗆 No 🔯	(See other safet of information interest (See	6
owed by the corporation have been paid and the n	er or trustee empowered to execute this application in lution has been eliminated, the corporate name satisfi- ames of individuals listed on this form do not qualify in nature stall have the same legal effect as it made un	es the requirements of section 60% or an exemption under section 11	10401 or 617 0401, F.S., that	all fees
SIGNATURE: SIGNATURE AND TYPED OR PRIN	STED NAME OF STORMING OFFICER OR DIRECTOR	3-3/-9	9 (407) 491-4 Daytera Provinces	382



Passeres Systems, Inc.

12472 Lake Underhill Road, Suite 201 Orlando, FL 32828 Ph: 407-849-6382 Fax: 407-849-6385

March 31, 1999

Atten: Sprather Divisions of Corporations Department of State P.O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

I sending the required completed 203. Reinstatement form for a corporation requested on 02-13-99. Per a conversation with a member of your staff, I am also including Check #113 for \$300.00 for the payment of yearly fees for 1998 (\$150.00) and 1999 (\$150.00) calendar year.

Do to several changes in our executive staff, our corporate mail information had been forwarded to several address resulting in failure to complete the yearly form. Initially we had an address of 12929 Lower River Blvd. It was then changed to 25 S. Magnolia Ave and then to 800 S. Highlands Ave all in Orlando.

Our current address is 12472 Lake Underhill Road, Orlando, FL 32828

If there is any additional information need, please contact me directly at 407-497-6382.

Sincerely,

Anterro Graham Registered Agent CEO/President