

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

03 SEP 16 AM 9:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000010658

1. Corporation Name

Solutions Attech, Inc.

700023175877  
03/18/03--01063--021 \*\*\*450.00

2. Principal Office Address

2851 N.E. 183rd St.

Suite, Apt. #, etc.

#807

City & State

Aventura, FL

Zip

33160

Country

USA

3. Mailing Office Address

4611 S. Univ. Dr.

Suite, Apt. #, etc.

#106

City & State

Davie, FL

Zip

33328

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

OCTOBER 1998

5. FEI Number

65-0868834

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

01 - 03 UBR

**7. Name and Address of Current Registered Agent**

Name

Alexandra Rodriguez

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

2851 N.E. 183rd St. Admiral's Port (East Side)

Suite, Apt. #, Etc.

#807

City

Aventura

State

FL

Zip Code

33160

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 09/09/2003

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
Prd	Francisco Rotulo	158 Gillyway	N. Lauderdale, FL 33328
Secy	Alexandra Rodriguez	2851 N.E. 183rd St. #807	Aventura, FL 33160

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Signature]*

9/09/2003 (305) 932-5227  
Date Daytime Phone #

CR2E081 (10/02)

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

REF: Solutions Alltech, Inc.

File #: P98000010658

Dear Sir/Madam:

May 14<sup>th</sup>, 2003

Recently, we applied for a customer account to be opened at a Florida based company. In the process of reviewing our application requirements, the company informed us that the State of Florida records indicated that our corporation had a status of "dissolved".

Upon contacting your office, I spoke with a representative and was told that in September of 2001 our corporation was dissolved due to failure to file the annual corporation returns.

We had no knowledge of this fact – the returns were always filed by our accountant. (We did, however, have a change of accounting firms around that time). Upon checking with both parties, there was no record of the returns ever having been received and therefore, unfortunately, they were never filed.

We ask for your kind consideration to re-instate our corporation to an active status. Enclosed is a check in the amount of \$ 450.00 for the past due annual return fees. If you can provide us with the return forms and information, we will have our accountant file these returns in arrears immediately.

Thank you for your assistance.

Any questions or comments, please contact us: (954) 423-1872.

Sincerely,

  
Alexandra Rodriguez

**SOLUTIONS ALLTECH, INC.**  
**4271 SW 78<sup>TH</sup> DRIVE**  
**DAVIE, FL 33328**  
**USA**

FLORIDA DEPT. OF STATE  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL 32314

REF: P98000010658

SUBJECT: CHANGE OF ADDRESS/CHANGE OF MAILING ADDRESS

DEAR SIR/MADAM:

PLEASE BE ADVISED EFFECTIVE IMMEDIATELY THAT OUR PHYSICAL LOCATION ADDRESS  
IS AS FOLLOWS:

ADMIRAL'S PORT  
2851 N.E. 183<sup>RD</sup> STREET; #807  
AVENTURA, FL 33160

OUR MAILING ADDRESS WHICH ALL CORRESPONDENCE SHOULD BE SENT TO IS AS  
FOLLOWS:

SOLUTIONS ALLTECH, INC.  
4611 S. UNIVERSITY DRIVE, #106  
DAVIE, FL 33328

PLEASE REMOVE FROM YOUR RECORDS ANY PREVIOUS MAILING ADDRESS FOR OUR  
CORPORATION AS WE ONLY WILL RECEIVE MAIL AT THE ABOVE STATED ADDRESS.

IF YOU SHOULD HAVE ANY QUESTIONS, PLEASE DO NOT HESITATE TO CONTACT US.

SINCERELY,



ALESANDRA RODRIGUES  
OFFICER