PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

1. Corporation Name

INTERNATIONAL TRANSTECH INC.

Principal Place of Business

Mailing Address

6856 BIANCHINI CIRCLE

6856 BIANCHINI CIRCLE

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

REINSTATEMENT 03



	addresses are	a incorrect in any way, line th	nrough incorrect i		and enter	correction below.)002376 /03010021		
2. New Pr	incipal Office	Address, If Applicable	3. New Mail	iling Office Address, if Applicable			Date Incorporated or Qualified To Do Business in Florida 06/29/1998			
Suite, Apt. #, etc. Sui				Suite, Apt. #, etc.			5. FEI Numbe	ır -		Applied For
City & State	e		City & State			·	65-0854233 Not Applica			Not Applicable
Zip		Country	Zip		Countr	у	6. CERTIFICATI	E OF STATUS DESIRED		litional Fee required
7. Names	and Street Ad	dresses of Each Officer and	1/or Director (Flo	rida nonpro	fit corpora	tions must list at lea	ast 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip		
Р	ETEZADY, NOOREDIN			6856 BIANCHINI CIRCLE				BOCA RATON FL 33433		
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	8. Name and Address of Current Registered Ag			ent			9. Name and Address of New Registered Agent			
C						Name	 		<u>_</u>	
ETEZA	DIN :	-	-	Street Address (F	P.O. Boy Number	is Not Acceptable)	<u> </u>			
6856 BIANCHINI CIRCLE						Olidet Address (i	.O. DOX (4dilibe)	is Not ricceptable)		
BOCA RATON FL 33433						Suite, Apt. #, Etc		,		
						City	_ .		State Zip (Code
10. I, being	appointed th	ne registered agent of the ab	ove named corpo	oration, am 1	familiar wi	th and accept the o	bligations of Sect	ion 607.0505, F.S. or 6	617.0505, F.S.	
Signature of Registered	of Agent	v. etigr	REGISTIBRED AG	PAIT MICT	T CICN	· · · · · · · · · · · · · · · · · · ·		Date 10-9	-03	
11. I certify	that I am an	officer or director or the rece				this application as p	provided for in cha	apter 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.

6856 Bianchini Circle Boca Raton, FL 33433 USA Telephone: 561-367-1741

Fax: 561-367-1586

International TransTech, Inc.

October 9, 2003

Divison of Corporations
Annual Report /Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Dear Sir or Madam:

This is to inform you that I did not receive the prior Uniform Business Report notices.

Enclosed, please find the fee for filing the report.

Sincerely,

Nooredin Etezady

President