

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 15 AM 10:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P98000066433**

**1. Corporation Name**

AT GLOBAL, INC.

**2. Principal Office Address**

13949 W. COLFAX AVENUE

Suite, Apt. #, etc.

City & State

GOLDEN, CO

Zip

80401

Country

US

**3. Mailing Office Address**

13949 W. COLFAX AVENUE

Suite, Apt. #, etc.

City & State

GOLDEN, CO

Zip

80401

Country

US

**4. Date Incorporated or Qualified  
To Do Business in Florida**

07/29/1998

**5. FEI Number**

65-0859236

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

Name

SCOTT J. JORDAN

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

c/o TRIPP SCOTT, P.A.

Suite, Apt. #, Etc.

110 SE 6th STREET, 15th FLOOR

City

FORT LAUDERDALE

State

FL

Zip Code

33301

**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

REGISTERED AGENT MUST SIGN

Date 10/10/2003

**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
DPT	STEPHEN C. GRAHAM	13949 W. COLFAX AVENUE	GOLDEN, CO 80401
D	ROBERT HEUSINKIELF	14673 MIDWAY ROAD, #220	DALLAS, TX 75244
DS	MARTIN B. SMITH, JR.	7901 SW 36th STREET	DAVIE, FL 33328

**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:**

*Stan Graham*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

10/13/2003

Date

Daytime Phone #

71 10/16