

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

ATX1

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**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 SEP 26 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800023367928
09/26/03--01077--003 **450.00

DOCUMENT # *P98000071541*

1. Corporation Name

ELEKTRA SYSTEMS INC.

2. Principal Office Address

9436 S. Orange Blossom Trl

Suite, Apt. #, etc.

3. Mailing Office Address

13727 Ridge Top Rd

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32837

Country

USA

Zip

32837

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

8/13/1998

5. FEI Number

59-3526177

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

AMIN, SAHIBZADA

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

9436 S. Orange Blossom Trl

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32837

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

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 / Street / Zip
Director	Sahibzada Amin	9436 S. Orange Blossom Trl	Orlando, FL 32837
V.P	Mubarak Ali	13727 Ridge Top Rd	Orlando, FL 32837

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: *Mubarak*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

09/17/03

(407) 856-0328

2012

ELEKTRA SYSTEMS, INC
13727 RIDGE TOP RD
ORLANDO, FL 32837
407-856-0238

September 18, 2003

Florida Department of Revenue
Division Of Corporations, U.B.R
P.O.Box 1500
Tallahassee, FL 32303-1500

Dear Sir or Madam:

As per the review of our records, indicated that we were not in receipt of the annual corporate renewal from your office. Upon discussion with your office, and with their suggestion, we are enclosing the check for the amount of \$ 450.00, representing \$ 150.00 for the years 2001, 2002 and 2003.

Kindly accept our report and waive any penalties associated with such filing. Your uppermost attention to this matter is appreciated.

Sincerely,


Mubarak Ali, Vice President