

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

00 FEB -1 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P98000071770

1. Corporation Name

MEDHA SYSTEMS INC.,

2. Principal Office Address

577 WHITTINGHAM PL

3. Mailing Office Address

577 WHITTINGHAM PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKE MARY, FL

City & State

LAKE MARY, FL

Zip

32746

Country

USA

Zip

32746

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/18/1998

5. FEI Number

59-3527757

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

BHASKARA REDDY DANDU

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

577 WHITTINGHAM PL,

Suite, Apt. #, Etc.

City

LAKE MARY,

State

FL

Zip Code

32746

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

Bhaskara Reddy Dandu

REGISTERED AGENT MUST SIGN

Date 01/14/2000

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
PD PRESIDENT	BHASKARA R. DANDU	577 WHITTINGHAM PL,	LAKE MARY, FL 32746
SD SECRETARY	NIREESHA DANDU	577 WHITTINGHAM PL,	LAKE MARY, FL 32746
PD	BHASKARA R. DANDU	577 WHITTINGHAM PL,	LAKE MARY, FL 32746
ST	NIREESHA DANDU	577 WHITTINGHAM PL,	LAKE MARY, FL 32746

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:

Bhaskara Reddy Dandu (BHASKARA R. DANDU)

01/14/2000

407-328-8814

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #