

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
02 JUL -1 PM 1:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000083800

1. Corporation Name

Hi Tech Service, Inc.

2. Principal Office Address

7319 Seamans Bluff

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32835

Country

U.S.A

3. Mailing Office Address

P.O. Box 887

Suite, Apt. #, etc.

City & State

Windermere, FL

Zip

34786

Country

U.S.A

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

September 29, 1998

5. FEI Number

59-3537634

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

Hossein Alaie

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

7319 Seamans Bluff

Suite, Apt. #, Etc.

City

Orlando

200006231712--6

-07/05/02--01076--027

****300.00 ****300.00

State

FL

Zip Code

32835

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

Hossein Alaie

REGISTERED AGENT MUST SIGN

Date 1-15-2002

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
officer	Hossein Alaie	7319 Seamans Bluff	Orlando, FL 32835

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:

Hossein Alaie HOSSEIN ALAIE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-2002 (407)523-0603

Date

Daytime Phone #

CR2E081 (9/01)

March 15, 1999

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Document Number: P98000083800 EIN# 59-3537634

To whom it may concern:

Please change the address for Hi Tech Service, Inc./Microtech Computer Center (Hossein Alaie) from P.O. Box 617194, Orlando, FL 32861 to P.O. Box 887 Windermere, FL 34786.

If you have any questions please contact me at (407) 523-0603

Sincerely,

Hossein Alaie
Owner

I have checked with your office and our address is still incorrect. Please change the address.

May 20, 2000

Please change the address
6-28-2002 Hossein Alaie