

APPLICATION
FOR
REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

00 UBR

 FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

00 OCT 25 PM 12:56

DOCUMENT # P99000004987

1. Corporation Name

SIMPLE PC SOLUTIONS, INC.

Principal Place of Business

600 W. OAKRIDGE RD. #1-A
ORLANDO FL 32809

Mailing Address

600 W. OAKRIDGE RD. #1-A
ORLANDO FL 32809

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/15/1999

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	ARIZA, JUAN	600 W. OAKRIDGE RD. #1-A	ORLANDO FL 32809

 000003465137--5
 -11/15/00--01114--012
 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

 ARIZA, JUAN
 600 W. OAKRIDGE RD. #1-A
 ORLANDO FL 32809

9. Name and Address of New Registered Agent

 Name: Juan E. Ariza
 Street Address (P.O. Box Number is Not Acceptable): 2354 BLANDA ST
 Suite, Apt. #, Etc.: ORLANDO
 City: ORLANDO
 State: FL
 Zip Code: 32839

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent
 SIGNATURE REQUIRED
 REGISTERED AGENT MUST SIGN

Date

10/23/00

11. 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:

 SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/23/00 407 370-5392

AD

-2

Simple Pc Solutions Inc

600 W Oakridge Rd suite 1-A
Orlando Fl 32809
407-251-7622

Juan E Ariza: president

The reason for this letter is to inform your department that the application for renewal was never received and the notice of cancellation was received 10-21-00

That Simple Pc solutions Request to have the late fees waved at this time and that enclosed with this letter is the correct fee of \$150.00

We apologize for any problems the postal service has caused and look forward to doing business in the future.

Juan E Ariza

