

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 MAR 11 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000011727

1. Corporation Name

Cramm America, Inc.

2. Principal Office Address

3211 S. Andrews Avenue

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

Zip

33316

Country

USA

3. Mailing Office Address

3211 S. Andrews Avenue

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

Zip

33316

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 02/05/1999

5. FEI Number

65-0898397

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 03-04

7. Name and Address of Current Registered Agent

Name

John S. Andrews, Esq.

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

1501 NE 4th Avenue

Suite, Apt. #, Etc.

City

Fort Lauderdale,

State

FL

Zip Code

33304

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**

Date March 9, 2004

REGISTERED AGENT MUST SIGN

John S. Andrews

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
P/D	Reinhard Hiemstra	3211 S. Andrews Ave.	Fort Lauderdale, FL 33304
V/S/D	Wopke van der Schaaf	3211 S. Andrews Avenue	Fort Lauderdale, FL 33304

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wopke Van der Schaaf Wopke Vanderschaaf

Date

3/9/04

Daytime Phone #

954-522-6700

CR2E081 (01/04)

Cramm America, Inc.
3211 South Andrews Avenue
Fort Lauderdale, FL 33316

March 09, 2004

Florida Department of State
Division of Corporation
Attn: Justin Shivers
Reinstatement Section
PO Box 6327
Tallahassee, FL 32314

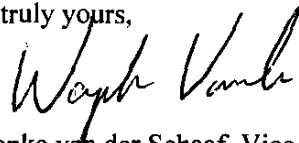
Re: Corporate Name: Cramm America, Inc.
Document Number: P99000011727

Dear Mr. Shivers:

Please allow this letter to confirm that Cramm America, Inc. did not receive from the Secretary of State a letter of rejection of the UBR Report that was filed for Cramm America, Inc. for 2003. The UBR Report was filed on approximately April 27, 2003.

Please reinstate our corporation.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Wopke van der Schaaf', written in a cursive style.

Wopke van der Schaaf, Vice President