APPLICATION **FOR** REINSTATEMENT



FILED SECRETARY OF STATE FIVISION OF CORPORATIONS

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DOCUMENT#



P99000025791

1. Corporation Name

Αl	JTON	MOTIVE	ELECTR	ONICS	INC.

Principal	Place	of	Business

Mailing Address

			322 53RD STREET AMPA FL 33619					
		incorrect in any way, line th						
2. New Prir	ncipal Office A	Address, If Applicable	3. New Maili	ing Office Ad	dress, If Applicable	Date Incorp To Do Busir	orated or Qualified ness in Florida	03/15/1999
Suite, Apt. #, etc. Suite, Apt			Suite, Apt. #,			5. FEI Number Apr		Applied For
City & State	9		City & State	ity & State				Not Applicable
Zip Country		Zip Country		Country	6. CERTIFICATE OF STATUS DESIRED			
7. Names a	and Street Ad		d/or Director (Flo	rida nonprofi	t corporations must list at lea		1	
Title(s) 1	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip	
D	BOERNER	I, VALERIE JEAN	1922 53RD S		rd street	TAMPA FL 33619		
D	JEFFERIES BOERNER, DAVID			1922 53RD STREET			TAMPA FL 33619	
						2	9000346 -11/15/00- ****150.0	5112 3 -01114005 0 ****150.00
8. Name and Address of Current Registered Agent					Name	9. Name and A	Address of New Registere	d Agent
DOPPMED VALEDIE IFAN				Street Address (F	Street Address (P.O. Box Number is Not Acceptable)			
TAMPA FL 33619				Suite, Apt. #, Etc.	Suite, Apt. #, Etc.			
		•			City		F	ate Zip Code
10. I, being Signature o Registered	f /	den Bjee	in Bo	ie n	amiliar with and accept the of	bligations of Secti	ion 607.0505, F.S. Date 10/23/	60
		<i>,</i>	REGISTERED AG	ENTMUST	SIGN			

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:

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	3E BEALBER
3 Valente	pears 120ther
SIGNATURE AND TYPED OR PRINE	ED NAME OF SIGNING OFFICER OR DIRECTOR

AUTOMOTIVE ELECTRONICS, INC. 1922 53RD STREET TAMPA, FLORIDA 33619

October 23, 2000

Division of Corporations Annual Reports/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

Re: Automotive Electronics, Inc.
Document # : P99000025791

Dear Sir/Madam:

Please find enclosed our check for \$150.00 and our completed Application for Reinstatement.

The enclosed Application for Reinstatement is the first correspondence received from the Florida Department of State regarding the status of our corporation. Since we never received any other notification we assumed our corporation was in good standing. We called the Department of State and they instructed us to explain why we are delinquent in filing our annual report and send \$150.00 along with the completed Application for Reinstatement.

As such, we respectfully request that you accept the enclosed check, reinstate our corporation, and abate all penalties associated with our failure to timely file our 2000 Uniform Business report.

Thank you for your consideration.

Valero 1 Bounes 10/23/00

Respectfully submitted,

Valerie J. Boerner

President

cc: file