Pg 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT

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

REMOVED AND FILED

01 MAY 24 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 99000086021

1. Corporation Name

A.I. SYSTEMS, INC.

2. Principal Office Address	3. Mailing Office Address
1172 S. DIXIE HWY	1172 S. DIXIE HWY
Suite, Apt. #, etc. #452	Suite, Apt. #, etc. #452
City & State CORAL GABLES, FL	City & State CORAL GABLES, FL
Zip 33146 Country USA	Zip 33146 Country USA

4. Date Incorporated or Qualified To Do Business in Florida 1999

5. FEI Number 65-095-1628 ☐ 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: Ruben Vila

300004336142--2
-05/31/01--01065--003
****300.00 ****300.00

Street Address (P.O. Box Number is Not Acceptable): 1172 S. DIXIE HWY

Suite, Apt. #, Etc.: #452

City: CORAL GABLES State: FL Zip Code: 33146

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: Ruben Vila
REGISTERED AGENT MUST SIGN

Date: 5/18/01

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
Pres.	RUBEN VILA	1172 S. DIXIE HWY #452	CORAL GABLES, FL 33146

MW

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: RUBEN VILA — 5/18/01 — 786-268-0400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E061 (9/00)

A.I. SYSTEMS, INC.

MAY 18, 2001

TO: DEPARTMENT OF STATE

RE: A.I. SYSTEMS, INC.

ENCLOSED PLEASE FIND OUR FEE TO REINSTATE THE CORPORATION A.I. SYSTEMS, INC.

WE NEVER RECEIVED THE RENEWAL APPLICATION, AS WE HAD MOVED TO OUR NEW ADDRESS:

1172 S. DIXIE HWY #452
CORAL GABLES, FL. 33146

THANK YOU FOR YOUR ASSISTANCE.

RUBEN VILLA

A.I. SYSTEMS, INC
1172 South Dixie Highway, #452
Coral Gables, FL 33146
Phone: 305-597-7053 • Fax: 305-597-9410