w.				
APPINATION REINSTATEMENT	FLORIDA DEPARTME Sandra B. Mo Secretary of S DIVISION OF CORPO	NT OF STATE rtham State	OMPLETING THIS FORM. APPLICATION (1) (1) (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	*Z
DOCUMENT # \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			SECRETARY OF STATE	
·			TALLAHASSEE, FLORIDA	
SPECTRALAB, INC.	Mailing Address			
6349 82 AVEN. PINELLAS PARK, FL 33781	-SAME	neve alien helau		
If above addresses are incorrect in any way, line throws: New Principal Office Address, If Applicable 349 82 AVE N	3. New Mailing Office Address, If		Date Incorporated or Qualified To Do Business in Florida	
Surie, Apl. #, etc. INELLAS PARK FL City & State	Surte, Apl. #, etc. PINELLAS PARK City & State	FL	5. FEI Number 5.9-3107368	Applied For Not Applicable
33781_ VSA	^{Zip} 33781 Count U	ŚA	CERTIFICATE OF STATUS DESIRED 60 10 1 Addition	onat Fee require icate of Status
7. Names and Street Addresses of Each Officer and/or Title(s) 1. 2. PD JACK BRAND VS PAULA BRAND	3 (DO NOT U 6349	Recommendations must list at lear reel Address of Each flicer and/or Director se Post Office Box N 82 AVE	Numbers) 4 City/State/Zip N PINELLAS PARK 33781	
			900002621 3 63 -08/20/9801094 	012 150,00
8. Name and Address of Current Registered Agent		Nama	Name and Address of New Registered Agent	
CALVIN C. ROBERTS		Name Street Address (P.O. Box Number is Not Acceptable)		
6574 30 AVE N		Suite, Apt. #, Etc.		
ST. PETERSBURG FL 33710		City State Zip Code		
10. I, being appointed the registeror agent of the above Signature of Registered Agent .	re named corporation, am familiar w	Ith and accept the ob	bligations of Section 607.0505, F.S. Date 8-14-98	
11. This corporation owes or ha Intangible Personal Propert	is paid the current ye y tax due June 30.	ar Yes 🂢	No (See other side for inform on intangible tax.)	
this reinstatement application, the reason for dissol	lution has been eliminated, the corpo	orate name satisfies	provided for in chapter 607 or 617, F.S. I further certify that the requirements of section 607.0401 or 617.0401, F.S., i an exemption under section 119.07(3)(i), F.S. The inform	that all fees

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/98 (727) 545-2297

SPECTRALAB, INC. Materials Testing Laboratory and Consulting Services

6349 82nd Avenue North Pinellas Park, FL 33781

Tel (727) 545-2297 Fax (727) 547-8024 e-mail:spectralab@mindspring.com

August 14, 1998

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

To Whom It May Concern:

Enclosed please find an application for reinstatement of Spectralab's corporate status.

We changed our address with your office in March of last year. It appears that a data entry error was made in your office on our mailing address. Because of this error, we never received any notification or follow-up reminders of the state requirement.

Upon advise of a gentleman named Tyrone in your office, I am sending this letter of explanation along with our remittance of \$150, which he said would be all that was required as the error was made on your end. I am also enclosing a copy of a fax from your office showing that our mailing address is incorrect in your records.

We have since moved to the larger building next door to our old facility. Our new address is reflected above. This should be used as the address for both of the listed corporate officers, and as the mailing address for any corporate correspondence.

Thank you for your attention and understanding.

Best Regards,

Jack Brand Director