

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 SEP 19 AM 11:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # V 36462

1. Corporation Name

MID-Tech Florida Inc.

100007900621--8  
-09/20/02--01065--030  
\*\*\*1658.75 \*\*\*1658.75

2. Principal Office Address

6785 S.W. 146th Street

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33158

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

**REINSTATEMENT** 96-02

4. Date Incorporated or Qualified  
To Do Business in Florida

1992

5. FEI Number

65-033 7822

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

Stefan Dragitsch

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

6785 S.W. 146th St.

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33158

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

REGISTERED AGENT MUST SIGN

Date

09/18/02

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

President Stefan Dragitsch 6785 S.W. 146th St. Miami FL 33158

Secretary Anolan A. Dragitsch 6785 S.W. 146th St. Miami FL 33158

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:

Stefan Dragitsch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/18/02

Date

(305) 282-1608

Daytime Phone #