

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6384

From: Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850)521-1000  
Fax Number : (850)558-1515

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**CORPORATION REINSTATEMENT  
THE BODE TECHNOLOGY GROUP, INC.**

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Certified Copy	0
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Estimated Charge	\$1,050.00

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Corporate Filing Menu

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CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

10 AUG -2 AM 10:34

KS

DOCUMENT # F07000005180

1. Corporation Name

The Bode Technology Group, Inc.

2. Principal Office Address - No P.O. Box #

10430 Furnace Road

3. Mailing Office Address

Suite, Apt. #, etc.

Suite 107

Suite, Apt. #, etc.

City & State

Lorton, VA

City & State

Zip

22079

Country

USA

Zip

Country

REINSTATEMENT 08-10

CR2E081 (6/10)

4. Date Incorporated or Qualified To Do Business in Florida 10/18/2007

5. FEI Number 54-1750293

Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED

Additional Filings Required for Certificate of Status

7. Name and Address of Current Registered Agent

Name Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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

Doreen Wallace

Doreen Wallace, Asst.

Date 8/2/10

REGISTERED AGENT MUST SIGN

Vice President

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
Chairman	Harvey W. Schiller	75 Rockefeller Plaza, 27th Floor	New York, NY 10019
CEO/President	Barry S. Watson	10430 Furnace Road, Suite 107	Lorton, VA 22079
CFO	Jeffrey O. Nyweide	75 Rockefeller Plaza, 27th Floor	New York, NY 10019

10. E-mail Address: contracts@bodetech.com philip.crowther@bodetech.com

(To be used for future annual report notification)

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. I further certify 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:

Barry S. Watson

2 August 2010

703 646 9800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #