

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED STATE
 SECRETARY OF CORPORATIONS
 DIVISION OF CORPORATIONS
 03 MAR 10 PM 2:17

DOCUMENT # F98000000259

1. Corporation Name

Simuflite Training International, Inc.

2. Principal Office Address

2929 West Airfield Drive

3. Mailing Office Address

2929 West Airfield Drive

Suite, Apt. #, etc.

Dallas/Ft. Worth Airport

Suite, Apt. #, etc.

Dallas/Ft. Worth Airport

City & State

Dallas, TX

City & State

Dallas, TX

Zip

75261

Country

Zip

75261

Country

REINSTATEMENT 02-03

4. Date Incorporated or Qualified To Do Business in Florida

01/15/1998

5. FEI Number

06-1462730

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 C T Corporate System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

600013700756

03/10/03--01002--007 **908 75

State
FL

Zip Code
33324

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

James A. Bordonaro
Assistant Secretary

REGISTERED AGENT MUST SIGN

Date 3/6/03

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
P & T	Roberts, Jeffrey	2929 West Airfield Drive	Dallas/Ft.Worth Airport/TX/75260
S	Allmand, David	2929 West Airfield Drive	Dallas/Ft. Worth Airport/TX/75260
D	Frederick, G.	4908 Tampa West Boulevard	Tampa/FL/33634
D	Renaud, Paul	4908 Tampa West Boulevard	Tampa/FL/33634
D	Leontidis, Nick	4908 Tampa West Boulevard	Tampa/FL/33634
CFO	Arthur Yeager	4908 Tampa West Boulevard	Tampa/FL/33634

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR


03/05/2003 (813) 887-1491

Date

Daytime Phone #


CR2E081 (10/02)

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CORPORATION REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F98000000259 1. Corporation Name Simuflite Training International, Inc.			
2. Principal Office Address 2929 West Airfield Drive Suite, Apt. #, etc. Dallas/Ft. Worth Airport City & State Dallas, TX Zip 75261		3. Mailing Office Address 2929 West Airfield Drive Suite, Apt. #, etc. Dallas/Ft. Worth Airport City & State Dallas, TX Zip 75261	
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		Applied For Not Applicable	
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Name C T Corporate System			
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road			
Suite, Apt. #, Etc.			
City Plantation		State FL	Zip Code 33324

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 REGISTERED AGENT MUST SIGN **Assistant Secretary**

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CR2E081 (10/02)