

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

193

APPLICATION FOR



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

FILED

02 NOV 22 PM 2:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2002 UBR #

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11/20/02--01014--017 \*\*150.00

DOCUMENT # F99000002920

1. Corporation Name

22ND CENTURY TECHNOLOGIES, INC.

Principal Place of Business

1129 BROAD ST  
SUITE II  
SHREWSBURY NJ 07702

Mailing Address

1129 BROAD ST  
SUITE II  
SHREWSBURY NJ 07702

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

One Main St, #219  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

One Main St  
Suite, Apt. #, etc.

4. Date incorporated or Qualified To Do Business in Florida

06/08/1999

5. FEI Number

22-3502121

Applied For

Not Applicable

City & State

Eatontown, NJ

City & State

Eatontown, NJ

Zip 07724

Country USA

Zip 07724

Country USA

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PCD	SINGH, SATVINDER	<del>1129 BROAD ST</del> One Main St #219	<del>SHREWSBURY NJ 07702</del> Eatontown, NJ 07724

8. Name and Address of Current Registered Agent

SINGH, SATVINDER  
4961 HAVERHILL COMM #29  
WEST PALM BEACH FL 33417

9. Name and Address of New Registered Agent

Name SATVINDER SINGH  
Street Address (P.O. Box Number is Not Acceptable)  
2892 Tennis club Dr, #302  
Suite, Apt. #, Etc.  
City West Palm Beach State FL Zip Code 33417

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/14/02

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 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/14/02 732 542 7799

Daytime Phone #

CR2E040 (8002)

# 22nd Century Technologies, Inc.



Software Consulting & Development

Web: <http://www.22ndcenturytech.com>

November 14, 2002

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

Sub. Notice of Administrative Dissolution Or Revocation.

Dear Sir/ Madam.

I am hereby filing the application for reinstatement. Since both our addresses in NJ and FL had changed we did not get your prior notices. I have filled out our correct addresses on the form now.

We are submitting the amount of \$ 150 as the application fees. I would like to request you to waive the \$600 reinstatement fee.

Please let us know if you need anything else from our side.

Thanks and hoping for a favorable action.

A handwritten signature in black ink, appearing to read 'Satvinder Singh', with a long horizontal line extending to the right.

Satvinder Singh  
President