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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # FO1000002667		1. Corporation Name EMERGING MARKETS COMMUNICATIONS, INC.	
2. Principal Office Address 800 BRICKELL AVENUE SUITE 900 MIAMI, FL Zip 33131 Country USA		3. Mailing Office Address 800 BRICKELL AVENUE SUITE 900 MIAMI, FL Zip 33131 Country USA	

REINSTATEMENT 031000

4. Date Incorporated or Qualified To Do Business in Florida 5/17/2001	5. FEI Number 593-740-735	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐ 38.75 Additional Fee required for a 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	
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 607.0303 or 617.0503, F.S.

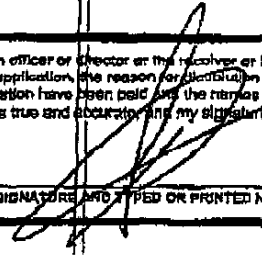
Signature of Registered Agent:  **Jeanine Reynolds** Date: 2-19-04

REGISTERED AGENT MUST SIGN as its agent

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officer and/or Director	Street Address of Each Officer and/or Director	City / State / Zip
C.E.O	PAROLA, HERBERT	800 BRICKELL AVENUE SUITE # 900	MIAMI, FL 33131
C.O.O.	AVELLAN, ABEL	800 BRICKELL AVENUE SUITE # 900	MIAMI, FL 33131

PA 2/20

10. I certify that I am an officer or director of the corporation 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 617.0401 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)(j), 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:  02-17-04 (305) 539-1358

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

5/K

CORPORATION REINSTATEMENT
EMERGING MARKETS COMMUNICATIONS, INC.

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