PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



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## CORPORATION REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT #

V58155

1. Corporation Name

COMMUNICATION CONCEPTS & INVESTMENTS, INC

FILED 00 DEC 14 PM 12: 59

SECRETARY OF STATE TALLAHASSEE, FLORIDA

5												
2. Principal	Office Address	3. Mailing Office A				•						
2.75.43 <b>2</b> 6	0523 State Road 7	20523	State Road 7	REIN	STATEMENT							
Suite, Apt. #	, etc.	Suite, Apt. #, etc.										
S	uite 6243	Suite	6243		oorated or Qualified iness in Florida 8/17.	/1992 <b>SP</b>						
City & State		City & State		5. FEI Numbe		Applied For						
Boca R	aton, Florida	Boca Raton	, Florida	65-035		Not Applicable						
Zip	Country	Zip	Country	6.	S8.75	Additional Fee required						
33498	USA	33498	USA	CERTIFICATE	OF STATUS DESIRED . for a	Additional Fee required Certificate of Status						
		7. Name a	and Address of Current Regis									
	Name Mark J. Bryn, Es	q• .	9	00003505: -12/19/0001	3 <b>89 9</b> 1066- <b>-0</b> 13							
:	Street Address (P.O. Box Number is One Biscayne Tower	Not Acceptable) , 2 South Bis	cayne Boulevard	<del>"</del>	****750.00	****7 <b>5</b> 0.00						
	Suite, Apt. #, Etc. Suite 3599											
	City Miami				State Zip Code FL 33131							
8. I heing	appointed the registered agent of the a	hove named corporation.	am familiar with and accept th	ne obligations of secti	on 607.0505 or 617.0503, F.S.							
			,	-								
Signature of Registered a	Agent				Date							
	<u></u>	REGISTERED AGENT	and the same of th	res <u>t say</u> 20 say								
9. Names	and Street Addresses of Each Officer	and/or Director (Florida n	onprofit corporations must list a	at least 3 directors)	<del></del>							
Titles	Name of Officers and/or Directo	ors	Street Address of E Officer and/or Dire									
P,D	Larry Levinson	20	523 State Road	<b>7,</b> #6243 ამმ	Boca Raton, Flor	ida 33498						
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}												
L		No. 10 Test and the Assessment of the Assessment	D. 10 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		See a grant of the property of the see and							
this rei	y that I am an officer or director or the re instatement application, the reason for c by the corporation have been paid and t application is true and accurate, and m	lissolution has been elimi he names of individuals li	nated, the corporate name sati sted on this form do not qualify	sfies the requirement r for an exemption un	s of section 607.0401 or 617.040	I, F.S., that all lees						
Ì	Man 1	n	A-th-WCY-IK-F		- 1 11 0000	205 27/ 252						
SIGNA	TURE: <u>* /                                  </u>		Athory-IN-P.	20t	December 11,2000	<u>305-374-</u> 0501						

December 11,2000 305-374-0501 Daytime Phone #





## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1.	The	name	of	the	corp	orati	on i	s:_	C	OMMU	NICA	TION	CON	CEPT	S &	IN	VEST	MENT	S,I
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					One I	Biscayı	ne To	wer	c, S	uite	359	9				-		_	
<u></u>					2 Sou	th Bis	scayr	e I	3ou1	evar	d,								
					Miami	i, F1	orida		331	31	-								٠

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Mark J. Brvn