

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

00 DEC 14 PM 12: 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V58155

1. Corporation Name
COMMUNICATION CONCEPTS & INVESTMENTS, INC.

2. Principal Office Address
20523 State Road 7

Suite, Apt. #, etc.
Suite 6243

City & State
Boca Raton, Florida

Zip Country
33498 USA

3. Mailing Office Address
20523 State Road 7

Suite, Apt. #, etc.
Suite 6243

City & State
Boca Raton, Florida

Zip Country
33498 USA

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida** 8/17/1992 **SP**

5. FEI Number 65-0352538 **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
Mark J. Bryn, Esq.
Street Address (P.O. Box Number is Not Acceptable)
One Biscayne Tower, 2 South Biscayne Boulevard
Suite, Apt. #, Etc.
Suite 3599
City
Miami

900003505989-9
-12/19/00-01066-013
****750.00 ****750.00

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

Date

REGISTERED AGENT MUST SIGN

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,D	Larry Levinson	20523 State Road 7, #6243	Boca Raton, Florida 33498

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
Mark J. Bryn, Esquire

December 11, 2000 305-374-050

Date

Daytime Phone #

292

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 corporation is: COMMUNICATION CONCEPTS & INVESTMENTS, INC.

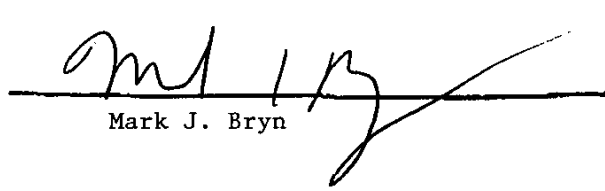
2. The name and street address of the registered agent and office is: Mark J. Bryn, Esq.

One Biscayne Tower, Suite 3599

2 South Biscayne Boulevard,

Miami, Florida 33131

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. Bryn