

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F000000003070

1. Corporation Name
 Command Communication's Inc.

2. Principal Office Address
 4012 Cortez Rd West
 Suite, Apt. #, etc.
 2102
 City & State
 Bradenton FL
 Zip
 34210
 Country
 mawatee

3. Mailing Office Address
 SAME
 Suite, Apt. #, etc.
 SAME
 City & State
 SAME
 Zip
 SAME
 Country
 SAME

FILED
 02 FEB 18 PM 2:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number
 65-1122169
 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
 Bob Taylor
 Street Address (P.O. Box Number is Not Acceptable)
 4012 Cortez Rd West Suite 2102
 Suite, Apt. #, Etc.
 City
 Bradenton
 State
 FL
 Zip Code
 34210

600005027256--0
 02/28/02--01067--002
 ***308.75 ***308.75

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 Bob Taylor Date 01-08-02
 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
C.E.O	Bob Taylor	4012 Cortez Rd West Ste 2102	Bradenton FL 34210
Pres	Anne Taylor	4012 Cortez Rd West Ste 2102	Bradenton FL 34210

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: Bob Taylor C.E.O. 02-08-02 9417523116
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (8/01)

\$308.75
2004

Command Communications, Inc.
4012 Cortez Road West
Suite 2102
Bradenton, FL 34207
Tel: 941-752-3116
Fax: 941-752-3266



Fax

To: Secretary of State
Cooperation Reinstatement From: Bob Taylor C.E.O.

Fax:

Pages:

Phone:

Date: 01-08-02

Re:

CC:

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• Comments:

Dear Sir or Madam.

We sent a letter approx 16 mts ago requesting
change of address from 616- Lyons Lane Longport
Key FL to 4012 Cortez Rd West Suite 2102
Bradenton FL 34210.

We never recieved the renewal form's.

Please wave the Reinstatement Fees

Kindest Regards
Bob Taylor C.E.O.