

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 JAN 23 AM 11:20

DOCUMENT # F00000004002

1. Corporation Name

Globaltek Telecom Services INC

500004845015--4

-01/30/02--01059--018

****900.00 ****900.00

2. Principal Office Address

5089 Bristol Industrial Way

Suite, Apt. #, etc.

Ste. C

City & State

Buford, GA

Zip

30518

Country

USA

3. Mailing Office Address

5089 Bristol Industrial Way

Suite, Apt. #, etc.

Ste. C

City & State

Buford, GA

Zip

30518

Country

USA

REINSTATEMENT 01-02

4. Date Incorporated or Qualified
To Do Business in Florida

7/13/2000

5. FEI Number

58-2521599

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

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301-2525

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

Laura R. Dunlap

Laura R. Dunlap
as its agent

Date

1/21/02

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
PD	Burkholder, Robert	5089-C Bristol Industrial	Buford, GA 30518
V	Manroe, Robert	5089-C Bristol Industrial	Buford, GA 30518
S	Richards, Kathleen M	4445-B Commerce Dr.	Buford, GA 30518
T	Pugh, Keith E	4445-B Commerce Dr.	Buford, GA 30518
CD	Enterline, Larry L	4445-B Commerce Dr	Buford, GA 30518
D	Trimm, T. Gary	4445-B Commerce Dr.	Buford, GA 30518

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

ROBERT MANROE

Date

1-03-02 770-271-1664

Daytime Phone #

CR2E081 (9/01)