

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000006235

FILED
Nov 27, 2007
Secretary of State

Entity Name: FUSION TELECOMMUNICATIONS INTERNATIONAL, INC.

Current Principal Place of Business:

420 LEXINGTON AVENUE, SU 518
NEW YORK, NY 10170

New Principal Place of Business:

420 LEXINGTON AVENUE, SU 1718
NEW YORK, NY 10170

Current Mailing Address:

420 LEXINGTON AVENUE, SU 518
NEW YORK, NY 10170

New Mailing Address:

420 LEXINGTON AVENUE, SU 1718
NEW YORK, NY 10170

FEI Number: 58-2342021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEITZ, WILLIAM R ESQ.
1475 W. CYPRESS CREEK ROAD, SUITE 204
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

HUGHES, BARBARA
1475 W. CYPRESS CREEK ROAD, SUITE 204
FORT LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BARBARA HUGHES

11/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ROSEN, MARVIN S
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: PCOO () Delete
Name: ROSEN, MATTHEW
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: STD () Delete
Name: TURITS, PHILIP D
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: DCB () Delete
Name: ROSEN, MARVIN S
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO () Change (X) Addition
Name: HUGHES, BARBARA
Address: 1475 W. CYPRESS CREEK ROAD, SUITE 204
City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA HUGHES

CFO

11/27/2007

Electronic Signature of Signing Officer or Director

Date