PLEASE READ	ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FOF	<u> ЗМ</u>		
APPLICATION APPLICATION		A DEPARTME!					$\left(\cdot \right)$	
FOR W		Sandra B. Mor Secretary of S			THE ET			
REINSTATEMENT	DI	VISION OF CORPO			FILED			
DOCUMENT # F9300004485				98 JUN 19 AM 10: 41				
1. Corporation Name -AMERICAN COMMUNICATIONS CONSTRUCTION, INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA				
AMERICAN COMMUNICATION	is cons	TRUCTION,	INC.	TĂL	LAHASSEE, FLO	ORIDA		
Principal Place of Business	Mading Addre	oss						
440 Interstate North Pa	arkway		r					
Atlanta GA 30339	440						- 476	
If above addresses are incorrect in any way, line thro	Parkway And Bolow		REINSTATEMENT 45-46"					
2. New Principal Office Address, If Applicable		ng Office Address, If			orated or Qualified ness in Florida	00/00/40	^^	
Suite, Apt. #, etc. Suite, A		#, etc.		5. FEI Number	oss in Florida 09/30		Applied For	
City & State	City & State			1	58-1953736	ļ	Not Applicable	
Zip Country	Zip	Countr	y	6. CERTIFICATE	E OF STATUS DESIRED	\$8.75 Addition	onal Fee require ficate of Status	
7. Names and Street Addresses of Each Officer and/ Name of Officers	or Director (Flor		itions must list at lea	·	1			
Title(s) and/or Directors		3 (Do NOT U	ficer and/or Director so Post Office Box N	l Numbers)	Gity 4	y / State / Zip		
Chm JOHNSTON, STEPHEN F SR		550 River Valley Rd			Atlanta G	A 303	28	
Sec David Hughes		5310 No:	rth Power	s Fy Rd	Atlanta G	SA 303	47	
Directors (see)			EI	0000256 -06/23/98				
Directors (see fist)					******		***8.75	
				61	 DODO256	:SEE	-;1	
	-06/23/9801071006 ***1200.00 ***120 2:00							
				****1200*				
						1		
8. Name and Address of Current F	l Registered Age	nt	Name	9. Name and A	Address of New Registe	red Agent		
NR'AI Services, Inc.			<u> </u>					
526 E a st Park Avenue	Street Address (P.O. Box Number is Not Acceptable)							
Tallahassee FL 3230	,		Suite, Apl. #, Etc.					
			City			State Zip Co	de	
10. I, being appointed the registered agent of the abo	ve named согро				on 607.0505, F.S.			
Signature of Registered Agent Parky War	GISTA HED AGE	NI MUSI SIGN	cretar	7	Date 6-/	8-48	7	
11. If this co rporation is a non-p	rofit with I	.R.S. 501(c)	(3) tax exem	npt status,	check this box		other side for nal information.)	
12. Does this corporation pay a Dept. of Revenue under S.	iny intang	ible tax to th	ie utes. Yes	X No [er side for infor intangible tax.		
pept. Or Heverlag arrast 3.	100.004,	i iunua oldi	uico. 168	LEN IAO [_]	p 100 100 A.	•	

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statulos. I release the Division of Corporations from any hability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer out-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 finding this reinstatement application the green for describing his period that the corporation has been publicated in this application is true and accurate, and my signature shall have the same logal effect as if made under oath.

SIGNATURE: DAvid Hughes/Sec

Directors

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