

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 JAN 14 PM 2:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F95000002092

1. Corporation Name

NEWSCOM SERVICES, INC.

Principal Place of Business

220 WEST FIRST ST.  
LOS ANGELES CA 90012

Mailing Address

220 WEST FIRST ST.  
LOS ANGELES CA 90012

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

04/28/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0574817

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	LEVINE, JESSE E	218 S. SPRING ST.	LOS ANGELES CA 90012
D	NIESE, WILLIAM A	220 W. FIRST ST.	LOS ANGELES CA 90012
PMD	EISNER, PETER	2801 PONCE DE LEON BLVD., SUITE 1050	CORAL GABLES FL 33134
D/VP	BRISCO, ROBERT N	220 W. FIRST ST.	LOS ANGELES CA 90012
T	ISINGER, WILLIAM R	220 W. FIRST ST.	LOS ANGELES CA 90012
S	AMER, CYNTHIA	220 WEST FIRST ST.	LOS ANGELES CA 90012

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST., STE. 105  
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

800002406408-3

-01/21/98-01044-003

\*\*\*\*\*900.00 \*\*\*\*\*900.00

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

J.E. Cristofore, asst. secretary  
REGISTERED AGENT MUST SIGN

Date

-01/21/98-01044-004

\*\*\*\*\*8.75 \*\*\*\*\*8.75

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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:

William H. Barlow

William H. Barlow

1/13/98

213 / 237-3700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



ATTACHMENT

7. Names and Street Addresses of Each Officer and/or Director (continued)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City/State/Zip
VP	Rosemary Metal	2801 Ponce de Leon Blvd.	Coral Gables, FL 33134
AS	William H. Barlow	220 W. First Street	Los Angeles, CA 90012
AT	Debra A. Gastler	220 W. First Street	Los Angeles, CA 90012