

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

DOCUMENT # **F95000004467**

1. Corporation Name
SRT TELECOMMUNICATIONS LIMITED CORPORATION

Principal Place of Business Mailing Address
300 SOUTH PINE ISLAND ROAD
SUITE 308
PLANTATION, FLORIDA 33324

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

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 98 JUL 14 PM 1:36
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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 ***1050.00 ***1050.00
REINSTATEMENT
 90 7/14/98

4. Date Incorporated or Qualified To Do Business in Florida September 15, 1995	
5. FEI Number 84-1318046	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
PRES.	COUCHMAN, W. RONALD	648 Main Road, P.O. Box 203	HUDSON HEIGHTS, QUEBEC CANADA JOP 1J0
VP	MORRIS, MICHAEL J.	97 Viking Place	DOLLARD-DES-ORMEAUX, QUEBEC CANADA H9G 2M5
VP	ROSS, DOUGLAS G.	151 Main Road	HUDSON, QUEBEC CANADA JOP 1H0
TREAS	ASST. SEC. LEDDY, D'ARCY J.	118 Amberley Crescent	POINTE CLAIRE, QUEBEC CANADA H9R 1S7
SEC.	BYRNE, THOMAS F.	978 Royal York Road	TORONTO, ONTARIO CANADA M8X 2E9

B. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
c/o CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FLORIDA 33324

9. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City
800002590308--1
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 *****52.50 *****52.50

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: *Kimberly D. Gilchrist*
 REGISTERED AGENT MUST SIGN *Kimberly D. Gilchrist* Date: *Asst. Secretary*

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: *Thomas F. Byrne*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Thomas F. Byrne - Secretary
 Date: **JULY 8, 1998**
 Daytime Phone #: **416/364-1616**

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