

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # F97000003986

1. Corporation Name

TRAK COMMUNICATIONS INC.

Principal Place of Business

Mailing Address

4726 EISENHOWER BLVD  
TAMPA FL 33634-6391

4726 EISENHOWER BLVD  
TAMPA FL 33634-6391

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

REINSTATEMENT

60

4. Date Incorporated or Qualified  
To Do Business in Florida

07/30/1997

5. FEI Number

59-3436098

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	ALLSTAFF, KENNETH R.	4726 EISENHOWER BLVD	TAMPA FL
SB AS	<del>TIPPING, JR</del> CHARLES L. POURCIAU	<del>10500 WESTOFFICE DRIVE, STE 200</del> 4726 Eisenhower Blvd.	HOUSTON TX Tampa, FL 33634
T/V	FRANSEN, DENNIS C	4726 EISENHOWER BLVD	TAMPA FL
CD/P	<del>GAMP, MICHAEL</del> Robert B. McKeon	<del>10500 WESTOFFICE DR., STE 200</del> 660 Madison Ave, 14th FL	HOUSTON TX New York, NY 10021
D/S	<del>THOMPSON, RAY F</del> Thomas J. Campbell	<del>10500 WESTOFFICE DR., STE 200</del> 660 Madison Ave, 14th FL	HOUSTON TX New York, NY 10021

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

*Charles L. Pourciau, Jr.*  
REGISTERED AGENT MUST SIGN

Date

10/17/00

11. 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:

*Charles L. Pourciau, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
CHARLES L. POURCIAU, JR.

KE

1600 + 813-961-7463  
Date Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE : 868640 5039004

AUTHORIZATION

*Patricia Pizito*

COST LIMIT : \$ 758.75

ORDER DATE : October 18, 2000

ORDER TIME : 11:24 AM

ORDER NO. : 868640-005

CUSTOMER NO: 5039004

CUSTOMER: Mr. Charles Pourciau  
Trak Microwave Corporation  
4726 Eisenhower Boulevard

Tampa, FL 33634-6391

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
OCT 19 1999  
NOT RECORDED  
TO AGENCY OF RECORDING

DOMESTIC FILINGS

NAME: TRAK COMMUNICATIONS INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF STATUS

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS \_\_\_\_\_