PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION									
FOR									
REINSTATEMEN									



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F98000000244

1. Corporation Name

OMNIAMERICA TOWERS, INC.

Principal Place of Business

Mailing Address

200 CRESCENT COURT, SUITE 1600

200 CRESCENT COURT. SUITE 1600

DALLAS TX 75201

DALLAS TX 75201

FILED

00 JUN 16 AM 11: 33

SEGRETARY OF STATE TALL AHASSEE FLORIDA



If above ac	ddresses are incorrect in any way, line thro	ugh incorrect in	formation a	nd enter c	orrection below.				
			New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 01/14/1998			
Suite, Apt. #, etc. 110 Huntington Ave 11thfl. [16 Hi			inflination Ave, 11th fl.			5. FEI Number	_5. FEI Number		
BOST U	Tiy a State	BOSTON MA				75-2730647	Not Applicabl		
202114	200710	Country 16			6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status				
7. Names a	and Street Addresses of Each Officer and/o	or Director (Flo	rida nonprof	it corporat	tions must list at le	east 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director 3			City / State / Zip		
COBD PID	FURST, JACK D Steven B. Dodge		200 CRE	e <mark>scent</mark> untina	GOUNT, SUITE れつへ名ve	1800, fl.	BALLAS TX 75201 Boston MA	021160	
VIS				11/0 HUNTINGTON AVE 11/4 FL			BALLAS TX 75201 POSTUM, MA	02116	
-∀0- V/t0	, o 1.20.0 y , 2.10 0 y , .			116 Huntington Ave, 11th fl			BALLAG-TX 75201 BO		
:PCEO ア/イ	r Joséph L. Winn			3100 SOUTH OCEAN BOULEVARD, 703N FL			PALM BEACH FL 33481 BOSION MA	02116	
000v				116 HUNTINGTON AVC, 11th [1			PALM BEACH FL 33481 Boston Ma	02116	
VAS-	MANDEL, F. H								
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent				
CORPORATION SERVICE COMPANY 1201 HAYS STREET 10 0 3 3 2 1 3 3 5 5 TALLAHASSEE FL 32301-2524*****900.00					Street ASCARS TO BOY Turfloor's City of the Total Control of the C				
					City		State FL		
10. I, being Signature of Registered	Agent	named corporation of the corpora	-RA	198	th and accept the	obligations of Secti	on 607.0505, F.S. Date	12000	
11. I certify:	that I am an officer or director or the receiv	er or trustee en	npowered to	execute t	his application as	provided for in cha	apter 607 or 617, F.S. I further	certify that when filling	

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

JENASUSE REQUISITION R. BIACK

(UN)315-7529

Date