

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # **F98000003798**

1. Corporation Name

**COMSCAPE TELECOMMUNICATIONS, INC.**

Principal Place of Business

Mailing Address

1926 10TH AVE. N., STE. 305  
WEST PALM BEACH FL 33461-3310

1926 10TH AVE. N., STE. 305  
WEST PALM BEACH FL 33461-3310

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

**REINSTATEMENT** 01

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 DEC 13 PM 4:00

600004740236--1  
-12/26/01--01109--003  
\*\*\*\*750.00 \*\*\*\*750.00



2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

07/02/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

31-1470037

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PC	PATEL, GHANSHYAM C	1926 10TH AVE. N., STE. 305	WEST PALM BEACH FL 33461
DS	BYRNE, JEREMIAH P	1926 10TH AVE. N., STE. 305	WEST PALM BEACH FL 33461
<del>D</del>	<del>LEIBOWITZ, HARRY</del>	<del>1926 10TH AVE. N., STE. 305</del>	<del>WEST PALM BEACH FL 33461</del>
<del>DN</del>	<del>PATEL, RAMAN C</del>	<del>1926 10TH AVE. N., STE. 305</del>	<del>WEST PALM BEACH FL 33461</del>
TD	JAYANTHAN, JAY K	1926 10TH AVE. N., STE. 305	WEST PALM BEACH FL 33461
<del>D</del>	<del>HUBER, DAVID J</del>	<del>1926 10TH AVE. N. STE. 305</del>	<del>WEST PALM BEACH FL 33461</del>

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PATEL, GHANSHYAM C  
1926 10TH AVE. N., STE. 305  
WEST PALM BEACH FL 33461-3310

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

Date

11/1/01

REGISTERED AGENT MUST SIGN

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAY K. JAYANTHAN

Date

11/1/01

Daytime Phone #

561-540-4762

CR2EQ40 (8/01)