

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR 16 AM 9:01

DOCUMENT # F99000002333

1. Corporation Name
Cooper Communications Group, Inc.
(formally Big Apple Telecommunications, Inc.)

*Reinstatement
2002-2003-2004*

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Office Address
1101 Stewart Avenue

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 2E

City & State
Garden City, NY

City & State

Zip
11530

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida 05/15/99

5. FEI Number 11-2745680

Applied For
Not Applicable

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

cc 3/19/04

7. Name and Address of Current Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.
City
Tallahassee

800029302558
02/24/04--01031--041 **1358.75
State FL Zip Code 32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent *[Signature]*
REGISTERED AGENT MUST SIGN

Date 1/21/04

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Irwin Cooper	1101 Stewart Ave Suite 2E Garden City, NY 11530	Garden City, NY 11530
VP	Gregory P. Canova	1101 Stewart Ave Suite 2E Garden City, NY 11530	Garden City, NY 11530

10. 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]* Gregory P. Canova 01/20/04 (516) 745-9100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (10/02)