

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

05 FEB 23 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P06000004992

1. Corporation Name

B & C WIRELESS TECHNOLOGIES, INC.

2. Principal Office Address

8145 NW. 33rd STREET

3. Mailing Office Address

8145 NW. 33rd STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33122

Country

USA

Zip

33122

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

01/18/2000

5. FEI Number

650973426

☒ Applied For☐ Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ADOLFO E. IGLESIAS

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

13501 SW. 128th STREET

Suite, Apt. #, Etc.

SUITE 208

City

MIAMI

State

FL

Zip Code

33186

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

Date 2/22/05

REGISTERED AGENT MUST SIGN

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
PVST	SHERLAND, CONRAD	4601 SW. 12th STREET	DEERFIELD BEACH, FL. 33442
D	SHERLAND, CONRAD	4601 SW. 12th STREET	DEERFIELD BEACH, FL. 33442

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/05

Date

954-260-2593

Daytime Phone #



**L O R D
& IGLESIAS**

accounting and business
consultant

February 23, 2005

Florida Department of State
Division of Corporations
Reinstatement Section
409 East Gaines Street
Tallahassee, Florida 32304
Attn: Barbara Mitchell

Re: EIN 650973426

Dear Ms. Mitchell:

Per our conversation the other day, enclosed please find the supporting documentation to reinstate our clients Corporation.

Please review and you shall see that our client made a timely payment with check number 1431 on April 27, 2004 in the amount of \$150.00 for the renewal of the corporation. Said payment was mailed to your office and applied to the Florida Unemployment Compensation Fund. We contacted your office and they stated that they realize the error and we still needed to pay the renewal fee. The fee was then paid with a credit card via online. The credit card was charged two fees of \$150 each, which brings the total to \$300.00. We were told by your office that upon paying the fee the corporation would be renewed. However, the corporation has been dissolved.

Per your instructions, I am enclosing copies of all said payments and a reinstatement form. With this information, I expect for the company to be reinstated and the additional credit of \$150 to be applied to the 2005 renewal.

Your cooperation and assistance to this matter is greatly appreciated. Should you have any questions or need any additional information, please feel free to contact me.

Sincerely,

Adolfo E. Iglesias
Lord & Iglesias Accounting Services
Enrolled Agent/ President

AI/bf