

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

FILED

02 NOV 27 PM 1:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000036522

1. Corporation Name  
**PHONETECH INC.**

Principal Place of Business

310 BRONSON BLVD STE 103  
COCOA FL 32922

Mailing Address

P.O. BOX 519  
COCOA FL 32923



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/06/2000

5. FEI Number

59-3727432

Applied For

Not Applicable

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	CLYNE, ARTHUR	211D PIERCE AVE	CAPE CANAVERAL FL 32920

500008868335  
11/07/02 01056 004 \*\*158.75

8. Name and Address of Current Registered Agent

CLYNE, ARTHUR J.  
310 BRONSON BLVD STE 103  
COCOA FL 32922

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Arthur J. Cline*  
**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date

11/4/02

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:

*Arthur J. Cline*  
**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/4/02 8216316000

Daytime Phone #

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November 5, 2002

Phonetech Inc.  
P O Box 519  
Cocoa FL 32923

Division of Corporations  
Annual Report/Reinstatement Division  
P O Box 6327  
Tallahassee FL 32314-6327

Re: Phonetech Inc., Reinstatement,  
Document Number **P00000036522**

Gentlemen:

I am writing to request your consideration to reinstate my corporation and to waive the reinstatement fee.

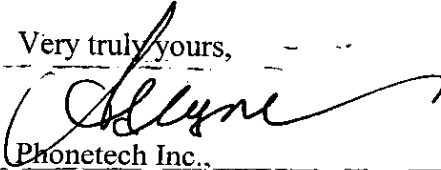
The company was forced to discontinue its active business due to illness, considerably more than a year ago. The business failed and administrative duties were not being performed, I was temporarily out of the state and did not receive any notices regarding filing documents or fees.

The two prior uniform business reports (UBR) notices were not received.

I have enclosed the application for reinstatement together with a check in the amount of \$158.75.

Your kindness in reinstating the corporation status will be sincerely appreciated.

Very truly yours,



Phonetech Inc.,  
Arthur Clyne, Vice President  
Registered Agent