

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 OCT 15 AM 8:55

DOCUMENT # P00000048361

1. Corporation Name

REGNUM GROUP, INC.

Principal Place of Business

Mailing Address

1020 NW 163RD DR  
MIAMI FL 33169

1020 NW 163RD DR  
MIAMI FL 33169

400004649394--2

-10/23/01--01022--019

\*\*\*\*150.00 \*\*\*\*150.00



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

05/16/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-1007821

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	JACOBI, KENNETH	1020 NW 163RD DR	MIAMI FL 33169
D	MALDONADO, EDWARD A	1020 NW 163RD DR	MIAMI FL 33169

8. Name and Address of Current Registered Agent

KENNETH JACOBI & ASSOCATES  
1020 NW 163RD DR  
MIAMI FL 33169

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

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

REGISTERED AGENT MUST SIGN

Date 10-11-01

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

KENNETH JACOBI

Date

10-11-01

Daytime Phone #

914-3300

CR2ED40 (8/01)



# THE REGNUM GROUP, INC.

- Telecommunications & Regulatory Consultants -

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October 11, 2001

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

**RE: REGNUM GROUP, INC. - P000000048361**

Dear Sir/Madam,

We have received a notice from your department advising us our certificate of administration has been revoked.

After speaking to one of your customer service representatives, we have been informed that a written letter should be sent in dispute. The reason for the dispute is we have not received any notification from the Secretary of State regarding this issue.

We were also advised to submit a payment of \$150.00 for renewal. Since we did not receive prior notification we are submitting this letter as our renewal.

Please review and advise.

Should there be any further questions or concerns please contact me at 305-914-3364.

Regards,



Kenneth Jacobi  
Principal  
The Regnum Group, Inc.

KJ/lw

Enclosures