

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 SEP -5 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000112399

1. Corporation Name

CATCH 9 COMMUNICATIONS, INC.

REINSTATEMENT 01-03

800022890178
09/09/03--01084--017 **1050.00

2. Principal Office Address

4300 West Cypress Street

Suite, Apt. #, etc.

Suite 900

City & State

Tampa, Florida

Zip

33607

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/07/2000

5. FEI Number

59-3705332

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

John Kang

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

332 Blanca Avenue

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33606

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

John Kang

REGISTERED AGENT MUST SIGN

Date

8/2/03

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
D/S/T	John Kang	4300 W. Cypress St., Suite 900	Tampa, FL 33607
D	Ricardo Salas	4300 W. Cypress St., Suite 900	Tampa, FL 33607
CFO	Charles Hutchinson	4300 W. Cypress St., Suite 900	Tampa, FL 33607

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

Charles Hutchinson CFO
CHARLES HUTCHINSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/21/03

Date

813 262 9376

Daytime Phone #

7/15