


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
05 MAY 23 AM 8:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000006867

1. Corporation Name  
All-Telco INC

2. Principal Office Address 4055 CORAL SPRINGS DRIVE Suite, Apt. #, etc.		3. Mailing Office Address 4055 CORAL SPRINGS DRIVE Suite, Apt. #, etc.	
City & State CORAL SPRINGS, FL		City & State CORAL SPRINGS, FL	
Zip 33065	Country USA	Zip 33065	Country USA

4. Date Incorporated or Qualified To Do Business in Florida 2/1/01

5. FEI Number 52-2288906  
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: Gabe R. Aikens

Street Address (P.O. Box Number is Not Acceptable): 4055 CORAL SPRINGS DRIVE

Suite, Apt. #, Etc.:

City: CORAL SPRINGS

State: FL Zip Code: 33065

200055857302  
06/07/05--01054--009 \*\*608.75

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: Gabe R. Aikens, III  
Date: 5/10/05

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
PRES.	GABE R. AIKENS, III	4055 CORAL SPRINGS DRIVE	CORAL SPRINGS, FL 33065

*[Handwritten signature and date: M/M 5/21/05]*

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: Gabe R. Aikens, III  
Date: 5/10/05 Daytime Phone #: 754-368-3676

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (01/05)

4055 Coral Springs Drive  
Coral Springs, Florida  
Ph: 954.227.9996  
Fax: 954.227.3335  
Email: info@all-telco.com

# All-Telco Inc.

technology and telecom solutions  
with your budget in mind



www.All-Telco.com

May 6, 2005

Florida Dept. of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

Dear Sir/Madam,

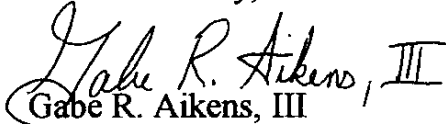
I am requesting the reinstatement of All-Telco Inc. (Document # P01000006867) and the waiving of the Annual Report and Corporate Supplemental Fees since 2002.

All-Telco Inc.'s mail was being forwarded to a company providing business administration services so mail was not received at the business physical address. When the business relationship was severed with this company, all mail not already processed was supposedly misplaced and incomplete records turned over omitting much needed information, including any notices that would have been sent to our company by the State.

Please find enclosed a certified check in the amount of Six Hundred and Eight Dollars and Seventy Five Cents (\$608.75) for the reinstatement fee and a Certificate of Status.

Your assistance will be greatly appreciated.

Yours sincerely,

  
Gabe R. Aikens, III

President

Enclosure.

