

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC 13 PM 4:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000032805

1. Corporation Name

ACCESS NETWORKS, INC.

Principal Place of Business

18599 90TH STREET NORTH
LOXAHATCHEE FL 33470

Mailing Address

18599 90TH STREET NORTH
LOXAHATCHEE FL 33470

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

7711 North Military Trail

Suite, Apt. #, etc.

-Suite, Apt. #, etc.

City & State

Palm Beach Gardens FL

Zip

Country

Zip

Country

33410

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/29/2001

5. FEI Number

05-1099682

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
W	SCHNEIDAU, WILLIAM	18599 90TH STREET NORTH	LOXAHATCHEE FL 33470

8. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
941 FOURTH STREET #200
MIAMI BEACH FL 33139

9. Name and Address of New Registered Agent

Name William Schneidau
Street Address (P.O. Box Number is Not Acceptable)
18599 90th St North
Suite, Apt. #, Etc.

City Loxahatchee

State

FL

Zip Code

33470

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

WILLIAM SCHNEIDAU
REGISTERED AGENT MUST SIGN

Date

12/10/02

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: William Schneidau

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/9/02 561 6223374

Daytime Phone #

CR2E040 (8/02)

2052

ACCESS NETWORKS INC

7711 NORTH MILITARY TRAIL
PALM BEACH GARDENS FL 33410
561 677 3374
561 677 3894
WWW.ACCESSNETWORKS.COM

December 10, 2002

FLA DEPT OF STATE
TALLAHASSEE FL

Dear Sir,

I am a new corporation and have moved a number of time since establishing the corp. I never received the UBR notices that you say I should have. I am requesting that you please not dissolve my company name. I have enclosed a check for the \$150.00 as stated in the information packet that I received the other day. Thank you in advance for your attention to this situation.

Sincerely,

A handwritten signature in black ink, appearing to be "William S. [unclear]", written in a cursive style.