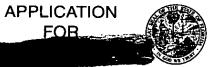
## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM PAGE IS



## FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State **DIVISION OF CORPORATIONS** 

P01000057555 DOCUMENT #

1. Corporation Name

DIALTONE EXCHANGE, INC.

Principal Place of Business

Mailing Address

2186 NOVA VILLAGE DRIVE DAVIE FL 33317

2186 NOVA VILLAGE DRIVE

**DAVIE FL 33317** 

SECRETARY OF STATE TALLAHASSEE, FLORIÐA

FILED

02 OCT 25 AM 10: 59

600008808686 11/05/02--01062--009 \*\*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 06/11/2001 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For 65 1116113 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Country Country CERTIFICATE OF STATUS DESIRED [ 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) Officer and/or Director City / State / Zip PD SAVAIN, ROGER JR 2186 NOVA VILLAGE DRIVE **DAVIE FL 33317** 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name SAVAIN, ALEXANDRA C Street Address (P.O. Box Number is Not Acceptable) 2186 NOVA VILLAGE DRIVE **DAVIE FL 33317** Suite, Apt. #, Etc. 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. Registered Agent

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:

page 2 or

## DIALTONE EXCHANGE, INC. 4370 Oakes Road, Suite 730 Davie, FL 33314

Ph: (954) 689-7474 Fax: (954) 689-7476

October 24, 2002

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs:

Enclosed please find check # 1143 in the amount of \$150.00 as well as the UBR form duly filled and signed by myself in order to reinstate my company. As I explained in a telephone conversation to a representative from your office this morning, we never received any notice of dissolution of our corporation.

Thank you for making all necessary arrangements and best regards.

Roger Savain Jr.

President