

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN -7 PM 1:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000061961

1. Corporation Name

ATlantic Telecom Corp.

2. Principal Office Address

950 S. Pine Island rd.

Suite, Apt. #, etc.

A 150-108

City & State

Plantation, FL

Zip

33324

Country

USA

3. Mailing Office Address

950 S. Pine Island rd.

Suite, Apt. #, etc.

A 150-108

City & State

Plantation, FL

Zip

33324

Country

USA

REINSTATEMENT 02-04

4. Date Incorporated or Qualified
To Do Business in Florida

6-20-2001

5. FEI Number

65-1211883

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

MAIA Williams.

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

2114 N. Flamingo rd. #150

Suite, Apt. #, Etc.

#150

City

Pembroke Pines

500026368895

01/07/04--01048--002 **450.00

500026368895

01/07/04 01048 003 **8.75

State
FL

Zip Code
33028

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

Maia Williams

Date 1-6-04

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.	KARLton Tucker	2114 N. Flamingo rd #150	Pembroke Pines FL 33028
S	Mike Young	2114 N. Flamingo rd #150	Pembroke Pines, FL 33028
Dir.	Chris Maysen	2114 N. Flamingo rd #150	Pembroke Pines, FL 33028

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:

Karlton Tucker

KARLton Tucker

Date

1-6-04

Daytime Phone #

954-727-8388

CR2E081 (10/02)

th