

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 DEC 16 PM 4:15

DOCUMENT # **PO1000091836**

1. Corporation Name

**ALL STAR CELLULAR, INC.**

2. Principal Office Address

**2433 Indian Trails**

3. Mailing Office Address

**24125 U.S. Hwy 19 N.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Palm Harbor FL**

City & State

**Clearwater, FL**

Zip

**34683**

Country

**Pinellas**

Zip

**33765**

Country

**Pinellas**

4. Date Incorporated or Qualified  
To Do Business in Florida

**9/17/2001**

5. FEI Number

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

**RICH MATTES**

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

**24125 U.S. Hwy 19 N.**

Suite, Apt. #, Etc.

City

**Clearwater**

State

**FL**

Zip Code

**33765**

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

**Rich L. Mattes**

Date **12-10-02**

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
<b>Pres.</b>	<b>Richard mattes</b>	<b>2433 indian Trails</b>	<b>Palm Harbor, FL 34683</b>

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:

**Rich L. Mattes**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**12-10-02**

Daytime Phone #

**727-410-5042**

CR2E081 (9/01)

12-9-02

To whom it may concern, I Richard Mattes president & ceo of All Star Cellular, Inc. failed to report and remit my annual corporation / uniform business report Form as required by law. I was not aware of this report for I did not receive anything via mail to my home address or business address. Being my first business without being notified I had no idea of this report. Please accept the enclosed application and appropriate fee(\$150) and apology, For reinstatement.

Yours truly, Richard Mattes

A handwritten signature in black ink, appearing to read "Richard Mattes", with a long horizontal flourish extending to the right.