

191082

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 04 AUG 24 PM 4:27 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P01000102158					
1. Corporation Name D-TEL, INC.					
96 CARLTON AVE					
2. Principal Office Address 96 CARLTON AVE		3. Mailing Office Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State CENTRAL ISLIP, NY		City & State			
Zip 11749	Country U.S.A.	Zip	Country		
4. Date Incorporated or Qualified To Do Business in Florida 10-22-1002		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 UCC FILINGS & SEARCH SERVICES INC					
Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVENUE					
Suite, Apt. #, Etc.					
City TALLAHASSEE				State FL	Zip Code 32301
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 HUB177		AGISON HAND, ASST SEC REGISTERED AGENT MUST SIGN		Date 8/13/04	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
PRES	JOSEPH MAGLIULO	16 SYLVESTER ROAD		WADING RIVER, NY 11792	
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: Joseph Magliulo		Joseph Magliulo, President		516-353-0927	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Telephone Number	

HUB177

CORPORATION

D-TEL, Inc.

D-TEL, Inc.

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August 23, 2004

Department of State
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

RE: Reinstatement of D-Tel, Inc
Document Number P01000102158

To whom it May Concern:

I respectfully request that the Reinstatement Fee Be waived on the above referenced corporation, as I never received notification of dissolution in 2002.

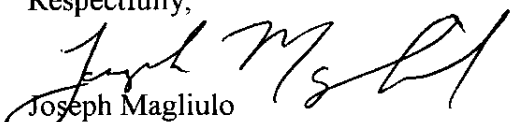
Pease accept the attached check in the amount of \$458.75 representing the Annual Report, Corporate Supplemental and Certificate of Status fee(s).

Please send the Certificate of Status to the following Address:

Joseph Magliulo
16 Sylvester Rd.
Wading River, NY 11792

Thank you for your assistance with this matter.

Respectfully,


Joseph Magliulo
President

96 Carlton Ave.

Central Islip

New York

11749

Phone
(631) 234-6123

Fax
(631) 234-5743

www.
xenyn.com