

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR -4 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PD 2000041671

1. Corporation Name

OMNET COMMUNICATIONS INC

REINSTATEMENT 03-04

2. Principal Office Address

171 SE 31 AVE

Suite, Apt. #, etc.

3. Mailing Office Address

171 SE 31 AVE

Suite, Apt. #, etc.

City & State

BOYNTON BCH FL

Zip

33435

Country

PALM BEACH

City & State

BOYNTON BCH FL

Zip

33435

Country

PALM BEACH

**4. Date Incorporated or Qualified
To Do Business in Florida**

17 APRIL 02

5. FEI Number

35-2166692

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

JOHN R. CICCIV

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

171 SE 31ST AVE

Suite, Apt. #, Etc.

City

BOYNTON BCH

State
FL

Zip Code

33435

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

2/24/03

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
<u>PRES</u>	<u>JOHN R. CICCIV</u>	<u>171 SE 31ST AVE</u>	<u>BOYNTON BCH FL 33435</u>

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/03

Date

86577-0542

Daytime Phone #

CR2ED61 (01/04)

2/23/04

To: whom it may concern,

As the Owner/President of Omnet Communications, I ask that you waive the corporate reinstatement fee, due to the fact that I did not receive the 2003 Annual Report.
Thank you for your consideration.

John R Cicciu owner/president
Omnet Communications
171 SE 31 ave
Boynton Beach Fl, 33435
561-577-0542


2/23/04