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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

05 DEC 16 PM 3:47


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200062327042

12/21/05--01037--003 **300.00


REINSTATEMENT

CR2E081 (8/05) 04-05


CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 702000122243					
1. Corporation Name Hamilton Telecom, Inc					
2. Principal Office Address 1900 Sabal Palm Dr.			3. Mailing Office Address 1900 Sabal Palm Dr.		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Davie, FL			City & State Davie, FL		
Zip 33324	Country Broward	Zip 33324	Country Broward		

4. Date Incorporated or Qualified To Do Business in Florida 11/13/02	
5. FEI Number 043724141	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name Sean W. Davis / Timesavers Account + Income		
Street Address (P.O. Box Number is Not Acceptable) 9591 Corona St Tax Services, Inc		
Suite, Apt. #, Etc.		
City Miramar	State FL	Zip Code 33025

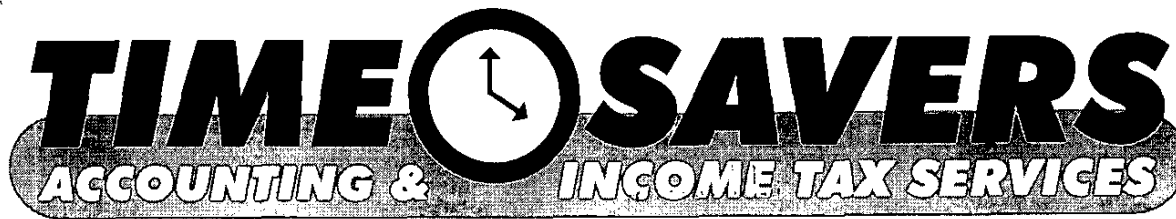
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.	
Signature of Registered Agent 	Date 12/5/05
REGISTERED AGENT MUST SIGN	

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
P	Bradford Hamilton	1900 Sabal Palm Drive, Davie, FL 33324	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date 12/5/05 Daytime Phone #

B Mitchell DEC 19 2005

2082



9591 Corona Street Miramar, FL 33025

Ph: 305.962.2883 Fax: 954.438.4309

November 16, 2005

Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Re: Hamilton Telecom, Inc
Document #: P02000122243

The Uniform Business Reports for the above referenced companies were not received in the mail resulting in the reports not being filed in a timely manner.

Please be advised that the correct address for all future correspondence is as follows:

1900 Sabal Palm Drive
Davie, FL 33324

I am hereby requesting that the penalty be waived and am including the amount of \$300.00 (three hundred dollars) to bring the filings current.

Sincerely,



Sean W. Davis



Bradford Hamilton - Director

E-MAIL: accountingtax2003@yahoo.com