

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000075968

FILED  
Sep 26, 2007  
Secretary of State

Entity Name: NEW ERA COMMUNICATIONS CORPORATION

## Current Principal Place of Business:

POST OFFICE BOX 35071  
MIAMI, FL 33135

## New Principal Place of Business:

1393 SW 1 STREET  
SUITE 400  
MIAMI, FL 33135 US

## Current Mailing Address:

POST OFFICE BOX 35071  
MIAMI, FL 33135

## New Mailing Address:

POST OFFICE BOX 350751  
MIAMI, FL 331350751 US

FEI Number: 65-0388464

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, MIRIAM M  
1393 SW 1 STREET  
MIAMI, FL 33135 US

## Name and Address of New Registered Agent:

MURPHY, HELEN A  
1393 SW 1 STREET  
MIAMI, FL 33135 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HELEN A. MURPHY

09/26/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MURPHY, HELEN A  
Address: POST OFFICE BOX 35071  
City-St-Zip: MIAMI, FL 33135

Title: VD ( ) Delete  
Name: HUTCHINSON, NORMAN  
Address: POST OFFICE BOX 35071  
City-St-Zip: MIAMI, FL 33135

Title: STD ( ) Delete  
Name: GARCIA, ONEL  
Address: POST OFFICE BOX 35071  
City-St-Zip: MIAMI, FL 33135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MURPHY, HELEN A  
Address: POST OFFICE BOX 350751  
City-St-Zip: MIAMI, FL 331350751 US

Title: VD (X) Change ( ) Addition  
Name: HUTCHINSON, NORMAN  
Address: POST OFFICE BOX 350751  
City-St-Zip: MIAMI, FL 331350751 US

Title: STD (X) Change ( ) Addition  
Name: GARCIA, ONEL  
Address: POST OFFICE BOX 350751  
City-St-Zip: MIAMI, FL 331350751 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELEN A. MURPHY

PD

09/26/2007

Electronic Signature of Signing Officer or Director

Date