PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 MAR 17 PM 12:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P39777

1 Corporation Name

ALDA Multichannels Ltd., Inc.

Principal Place of Business / Mailing Address

110 North Beach Road
Hobe Sound, FL 33455

REINSTATEMENT CW 96-97

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2 New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable
N/A	N/A
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 7-24-92

5. FEI Number: 65-0064306 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Chmn/ Dir.	Victor Oristano	110 North Beach Road	Hobe Sound, FL 33455
Pres/ Sec/Dir	Matthew Oristano	68 Old Quarry Road	Woodbridge, CT
VP/ Dir	Mark Oristano	2203 Woodland Oaks	Arlington, TX 70013
VP/ Dir	Michael Oristano	100 Camino Penasco	El Pasco, TX
Asst Secy	Robert Bragaw	ALDA, Inc. Two Corporate Dr.,Ste 249	Shelton, CT 06484

200002117522--7
-03/19/97--01013--007
****87.50 ****915.00

8. Name and Address of Current Registered Agent

Florida Lawdock Inc.
c/o William Littrell, Esq.
Quarles & Brady
515 North Flagar Drive
West Palm Beach, FL 33401

9. Name and Address of New Registered Agent

Name: CT Corporation System
Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road
Suite, Apt. #, Etc.:
City: Plantation | State: FL | Zip Code: 33324

CR2E040 (12/95)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Dwight A Coots
REGISTERED AGENT MUST SIGN
Dwight A. Coots, Asst. Secy.

Date: March 14, 1997

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Robert Bragaw, Asst. Secretary

SIGNATURE: Robert Bragaw
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3/ 6 /97

Daytime Phone #: (203) 925-7904

(FLA - 2113 - 3/7/96)