

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **P40679**

1. Corporation Name

CITICORP INTERNATIONAL COMMUNICATIONS, INC.

W97-23817

Principal Place of Business

Mailing Address

**12355 Sunrise Valley Drive, 5th floor
Reston, VA 20191**

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 Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

9/28/92

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

13-3108991

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
President	Stanley Welland	909 Third Avenue	New York, NY 10043
Secretary	Michael Nugent	909 Third Avenue	New York, NY 10043
Treasurer	Jim Hoppe	1919 Park Avenue	Weehawken, NJ 07087
Director	Kenneth Knapp	1900 Campus Commons Drive	Reston, VA 20190
Director	Frank Bevacqua	1919 Park Avenue	Weehawken, NJ 07087
VPAT	JOSEPH GIATTINO	12355 SUNRISE VALLEY DR.	RESTON, VA 20191

8. Name and Address of Current Registered Agent

**CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324**

9. Name and Address of New Registered Agent

Name

REINSTATEMENT

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

Kevin J. Gallagher

Kevin J. Gallagher Asst. V.P.

REGISTERED AGENT MUST SIGN

Date

10/15/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

310002340643-9
11/06/97-01098-004
******923.75**

12. 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 Giattino

Joseph Giattino, Vice President, Asst. Treasurer
12355 Sunrise Valley Dr., Reston, VA 20191

10/15/97

(703)708-1085

Date

Daytime Phone #

CR2E040 (12/96)