

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P92000009046

Entity Name: RADIANTCOM, CORP.

FILED
Sep 28, 2005
Secretary of State

Current Principal Place of Business:

8399 NW 66 STREET, SUITE 3
MIAMI, FL 33166

New Principal Place of Business:

15590 N.W. 15TH AVENUE
MIAMI, FL 33169

Current Mailing Address:

8399 NW 66 STREET, SUITE 3
MIAMI, FL 33166

New Mailing Address:

15590 N.W. 15TH AVENUE
MIAMI, FL 3316999

FEI Number: 30-0158379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECHEVERRIA, ULYSSES
5198 SW 157 AVE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

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: ULYSSES ECHEVERRIA

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: ECHEVERRIA, ULYSSES
Address: 8399 NW 66 STREET, SUITE 3
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ECHEVERRIA, ULYSSES
Address: 15590 N.W. 15TH AVENUE
City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ULYSSES ECHEVERRIA

PD

09/28/2005

Electronic Signature of Signing Officer or Director

Date