PLEASE READ				1	NG THIS FOR	M. (1
APPLICATION FOR REINSTATEMENT  FLORIDA DEPARTMENT OF STATE  Sans Common Mortham  State by of State  DIVIDIO C CORPORATIONS				FILED		
DOCUMENT # P93000027221				98 JUN 29 AM 9: 56		
1. Corporation Name  FLORIDA CELLULAR ENTERPRISES, INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Business Malling Address				4 13411064	nia dalah dini gadir dang dalah di	100 HAN 1881 (1881 HAN 1881 1881 1881
20101 N.W. 2ND AVE. SUITE 105 MIAMI FL 33169	TE 105 SUITE 105					
If above addresses are incorrect in any way, line through the Principal Office Address, If Applicable	ng Office Address, If A	Office Address, If Applicable  AAS OLAS BLUD.		Date Incorporated or Qualified     To Do Business in Florida     04/12/1993		
Suite, Apt. #, etc. Suite, Apt. # SUITE, Apt. # SUITE, Apt. #		etc. : # -200		5. FEI Number	65-0403291	Applied For
Zip Country	Zip Country			6.	OF STATUS DESIRED	\$8.75 Additional Fee required
7. Names and Street Addresses of Each Officer and/	or Director (Flo	rida nonprofit corpora		<u> </u>		for a Certificate of Status
Title(s) Name of Officers and/or Directors 2	Stre Off 3 (Do NOT Us	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Nur		City	/ State / Zip	
PS GAPRAHAN, BRIAN  DELEI	C/O 20401 N.W	END AVE.		MIAMI FL 33169 PELETE		
D J. JOHN GARR	1402 E. L	1402 E. LAS OLAS BLUD. FT. LAUDERO.				
						33367
				300002578083 1 -07/01/9801092007 ****515.00 ****515.00		
8, Name and Address of Current	Registered Age	nt		9. Name and A	ddress of New Register	ed Agent
Name				TOHN GARRAHAN		
2841 NE 196 TERR /402 /3				P.O. Box Number is Not Acceptable) とみら Oe.おち BLVD,		
N. MIAMI BEACH FL 33180 Suite. Apt. #, Etc. Suite.				#200		tate Zip Code
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the ob-				PERONE FL 33301		
Signature of Registered Agent						
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No						
12. I certify that I am an officer or director or the receithis reinstatement application, the reason for dissoved by the corporation have been paid and the on this application is true and accurate, and my significant structure.	dution has been names of individ gnature shall have	eliminated, the corpouals listed on this form	rate name satisfies n do not qualify for ct as if made under	the requirements an exemption und oath.	of section 607.0401 or 61	7.0401, F.S., that all fees
SIGNATURE AND THE OR FRI	ا ۱۳۰۱۳ مید. ام	OI I IVEN ON D				= 24 0000 1 00000 0

## J. JOHN GARRAHAN 1402 E. LAS OLAS BLVD., SUITE #200 FORT LAUDERDALE, FLORIDA 33301

TEL. 954-415-8399 FAX. 954-763-5602

JUNE 26, 1998

DIVISION OF CORPORATION'S MS. LESLIE SELLERS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32399

RE: VIACON PROPERTIES, INC.
VIACON PROPERTIES 1, INC.
FLORIDA CELLULAR ENTERPRISES, INC.

## **DEAR MS. SELLERS:**

FURTHER TO OUR CONVERSATION, THE SUBJECT CORPORATION ANNUAL REPORTS, WERE NOT COMPLETED AND RETURNED TO YOUR OFFICE DUE TO THE FOLLOWING:

- 1. VIACON PROPERTIES, INC., DID NOT RECEIVE UNTIL LAST WEEK. THE MAIL WAS INCORRECTLY SENT TO ANOTHER LOCATION.
- 2. VIACON PROPERTIES 1, INC. DID NOT RECEIVE UNTIL LAST WEEK. THE MAIL WAS INCORRECTLY SENT TO ANOTHER LOCATION.
- 3. FLORIDA CELLULAR ENTERPRISES, INC.. OUR FORMER ACCOUNTANT INFORMED US THAT THIS CORPORATION WAS IN GOOD STANDING WITH THE STATE OF FLORIDA. APPARENTLY THIS INDIVIDUAL DID NOT PROCESS THE PROPER FORMS.

## ENCLOSED, PLEASE FIND THREE CHECKS:

- 1. VIACON PROPERTIES, INC.., AMOUNT \$ 150.00, #5345.
- 2. VIACON PROPERTIES 1, INC., CHECK AMOUNT \$ 150.00, #5346.
- 3. FLORIDA CELLULAR ENTERPRISES, INC., CHECK AMOUNT \$ 515.00, #5347.

I HAVE ATTACHED A COPY OF THE POLICE REPORT FILLED AGAINST OUR FORMER ACCOUNTANT.

THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

REGARDS,

J. JOHN GARRAHAN

ATTACHMENTS: POLICE REPORT

VIACON PROPERTIES, INC. ANNUAL REPORT VIACON PROPERTIES 1, INC. ANNUAL REPORT FLORIDA CELLULAR ENTERPRISES INC. ANNUAL REPORT MEMORANDUM DATED AUGUST 17, 1997