PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION	
REINSTATEMENT	

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED

00 AUG -2 AM 8: 19

DOCUMENT # P93000043347						SECRETARY OF STATE TALEAHASSEE FLORIDA					
		ILECOM CORPORAT	ION						ONIUA		
2. Principal Office Address 3. Mailing Off				fice Address					\sim	ے. د	
1500 NW 62ND STREET 1500			1500 NW	NW 62ND STREET			STAT	TMEN		1-()	
SUITE 202 SUI City & State City &			Suite, Apt. #,	TE 202		4 2 2 2 2 3 7	4. Date Incorporated or Qualified				
			City & State			To Do Business in Florida 06/15/1993					
			FT. LAUI	FT. LAUDERDALE, FL			5. FEI Number Applied For 65 - 0414414 Applied For				
Zip 33309		Country	Zip 33309		Country	6	OF STATUS DE	\$8.75 or	Additional Fee a Certificate of S	equired Status	
			7. N	ame and Ad	dress of Current Regis	tered Agent					
	Street Add 5030 (Suite, Apt.	Name CRAIG ISROW Street Address (P.O. Box Number is Not Acceptable) 5030 CHAMPION BLVD. Suite, Apt. #, Etc. SUITE G1D									
	Oity		ВОС	A RATON			FL Z	ip Code 33496			
Signature of Registered	f Agent(egistifred agent of the abo	REGISTERED AG	ENT MUST	SIGN		07.0505 or 617 Date	July 31,	2000	CRZE081 (9/99)	
	nd Street Add	resses of Eagh Officer and	Vor Director (Florid	a nonprofit c		·	1	a			
Titles		Officers and/or Directo	rs	Street Address of Each Officer and/or Director			City / State / Zip				
P/D	CRAIG ISROW			5030 CHAMPION BLVD., SUITE G1D			BOCA RATON, FL 33496				
V /D	JIM SEVER			22 CORTLANDT STREET, 33RD FLOOR			NE	W YORK, NY	10007		
V/D		WAYNE DARVILL	E	22 CORTLANDT STREET, 33R			33RD FLOOR NEW YORK, NY 10007				
s		SUSAN CUTRIGH	Т	22 COR	TLANDT STREET,	33RD FLOOR	NE	W YORK, NY	10007		
:									KE		
this rein	nstatement appred by the corp d on this appli	fficer or director or the recollication, the reason for disoration have been paid arcation is true and accurate	solution has been ad the names of ind b, and my signature	eliminated, ti lividuals/liste shall have t	he corporate name satisfi d on this form do not qua he same legal effect as if	es the requirements of lity for an exemption of made under oath.	of section 607.0 under section 1	401 or 617.040 19.07(3)(i), F.S. 000 (954)	rtify that when 1 1, F.S., that all The information	אח	
	SI	GNATURE AND TYPEO OR	PRINTED NAME OF	&IGNING OF	FICER OR DIRECTOR		Date	Daytime	Phone #		