

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

00 APR 25 AM 8:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000037375

1. Corporation Name

CHEQUEPOINT SOUTH, INC.

N-9713

2. Principal Office Address

UNITED CORPORATE SVCS, INC.

Suite, Apt. #, etc.

Suite 508

3. Mailing Office Address

22 6ETRAL PARK SOUTH

Suite, Apt. #, etc.

9200 South Dadeland Blvd

City & State

MIAMI FL

City & State

NEW YORK, NY

Zip

FL 33156

Country

DADE

Zip

10019

Country

NEW YORK

**REINSTATEMENT**

9800

4. Date Incorporated or Qualified  
To Do Business in Florida

MAY 18, 1994

5. FEI Number

13-3784667

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

UNITED CORPORATE SERVICES, INC.

Street Address (P.O. Box Number is Not Acceptable)

9200 SOUTH DADELAND BLVD.

Suite, Apt. #, Etc.

SUITE 508

City

MIAMI

300003230473-2

05/01/00-01014-020

\*\*\*1058.75 \*\*\*1058.75

State  
FL

Zip Code 33156

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*Victor V. Bermudez*  
REGISTERED AGENT MUST SIGN

Date 4/18/00

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Secty/ Treas	DEHAN BASNAYAKE	104-60-QUEENS-BLVD. #5N	FOREST HILLS, NY 11375
Presi- dent	VICTOR BERMUDEZ	15103 CYPRESS RICH DRIVE CYPRESS, TX	77429
Direc- tor	COLVIN BROWN	c/o PCS ASIA, MANULIFE TWR 169 ELECTRIC RD., 7th floor	HONG KONG
Direc- tor	JAMES FULTON	c/o PCS ASIA, MANULIFE TWR 169 ELECTRIC RD., 7th floor	HONG KONG

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10. 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

*Victor V. Bermudez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

24 March 2000

Date

Daytime Phone #

(212)  
750-2400

CR2E081 (9/99)