

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 # P94000088758

1. Corporation Name

ELITE TELECOMMUNICATIONS, CORP.

Principal Place of Business

2138 NW 99 AVENUE
MIAMI, FL. 33172

Mailing Address

8045 NW 36 STREET
SUITE NO. 525
MIAMI, FL 33166

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

2138 NW 99 AVENUE

Suite, Apt. #, etc.

City & State

MIAMI, FL 33172

Zip

33172

3. New Mailing Office Address, If Applicable

8045 NW 36 STREET

Suite, Apt. #, etc.

SUITE NO. 525

City & State

MIAMI, FL 33166

Zip

33166

Country

USA

FILED

97 DEC 22 PM 1:57

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT

97
ad

4. Date Incorporated or Qualified
To Do Business in Florida

12/07/1994

5. FEI Number

65-0544830

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DECISION ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and Director (Florida nonprofit corporations must list at least one officer and one director)

Title(s)	Name of Officers and/or Directors	Street Address Office	City / State / Zip
1	2	3	4
PVSTD	ZILIAN, DANIEL	8120 GENEVA COURT, #D351	MIAMI, FL 33166

000002383700--8
-12/26/97--01098--003
****758.75 ****758.75

8. Name and Address of Current Registered Agent

ZILIAN, DANIEL
8120 GENEVA COURT #D351
MIAMI, FL 33166

9. Name and Address of New Registered Agent

Name
ZILIAN, DANIEL

Street Address (P.O. Box Number is Not Acceptable)
8120 GENEVA COURT

Suite, Apt. #, Etc.
SUITE NO. D351

City
MIAMI

State
FL

Zip Code
33166

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

REGISTERED AGENT MUST SIGN

Date 12/19/97

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

(See other side for information
on intangible tax.)

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:

DANIEL ZILIAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/19/97

Date

(305) 436-8814

Daytime Phone #

CR2500 (12/96)