DI FACE DEAD ALL IN	JETOLIOTIONE REFORE (COMPLETING THIS FORM.	
	RIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State		
BIVISION OF CORR CHARGON		97 DEC 22 111 5: 35	
DOCUMENT # P95000090275 1. Corporation Name		SECTION OF SYMPE TALLALARE A TLORIDA	
CYBER NETWORKS, INC.			
4631 Northwest 31 Avenue 46 Suite 265 Su Fort Lauderdale, Florida Fo	laiting Address 531 Northwest 31 Ave 11te 265 10rt Lauderdale, 10rida 33309 1000 (1000 per	DO NOT WHITE IN THIS SPACE	į
	Mailing Address, If Applicable	Date Incorporated or Qualified	
Suite, Apt. #, etc. Suite, A	Apt #, etc.	FEI Number	Applied For
City & State City & S	Stale	65-0620803	Not Applicable
Zip Country Zip	Country		itional Fee required rtificate of Status
7. Names and Street Addresses of Each Officer and/or Directo Title(s) 2 P/S/ T/D VP/ D Steven McConnell 8. Name and Address of Current Registere The Law Firm of Lawrence Spiegel Chartered 343 Almeria Avenue Coral Gables, Florida 331.	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box h 4631 Northwest 31 Suite 265 4631 Northwest 31 Suite 265 REINSTATEN d Agent J. Name Spiegel Street Address (f Suite, Apt. #, Etc. 343 Alm. City Coral G	Avenue Fort Lauderdale Florida 33309 Avenue Fort Lauderdale Florida 33309 Avenue Fort Lauderdale Florida 33309 1 1111123191-0103 *****750.00 *** *****750.00 *** *****750.00 *** *****750.00 *** *****750.00 *** *****750.00 *** ******750.00 *** ******750.00 *** ************ 9. Name and Address of New Registered Agent & Utrera, P.A., d/b/a Arro. Box Number is Not Acceptable) seria Avenue State FL	, 61 5. 33-020 ***750.00 2-47 merilawy
Signature of Registered Agent _ Bv :	corporation am faquifix with and accept the c a, P.A. d'Abya Amieric OVGENEMPRESIdent	blications of Section 607.0505, F.S. Date	
11. Does this corporation pay any int Dept. of Revenue under S. 199.0	angible tax to the	No (See other side for in on intangible to	

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I refease the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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. 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 or 617.0401 or 617.0401 or 617.0401 or 617.0401 is application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND BOOM THIS HAKES PORTO FICE PORTO TO COLOR TO THE STATE OF THE STATE O

(954) 557-5452 Daytinie Phone #