

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Hastings Communications, INC

995 000092937

2. Principal Office Address

2629 NE 14 ST.

3. Mailing Office Address

2629 NE 14 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FLA

City & State

FT. LAUDERDALE, FLA

Zip

33304

Country

USA

Zip

33304

Country

USA.

4. Date Incorporated or Qualified
To Do Business in Florida

12/7/1995

5. FEI Number

650620196

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

Louis ANDREANA

400005678684--7

-06/05/02--01001--008

***458.75 ***458.75

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

2629 NE 14 ST.

Suite, Apt. #, Etc.

City

FT. LAUDERDALE, FL

State
FL

Zip Code

33304

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

[Signature]

Date

5/15/02

REGISTERED AGENT MUST SIGN

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
CEOV	ANDREANA, John	2629 NE 14 ST.	FT. LAUDERDALE, FL 33304
CEOP	ANDREANA, Lou	2629 NE 14 ST.	FT. LAUD. FL 33304
T	ANDREANA, Lou	2629 NE 14 ST.	FT. LAUD. FL 33304

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/15/02

Daytime Phone #

954 564-2051

CR2E081 (9/01)

5/24/02

LAW OFFICES
MORGAN, CARRATT & O'CONNOR, P.A.

111 SOUTHEAST 12TH STREET, SUITE C
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TERRENCE P. O'CONNOR
MICHAEL E. O'CONNOR
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CHARLES R. MORGAN (of counsel)
HARRY G. CARRATT (1930-1998)
FRANCIS D. O'CONNOR (of counsel)

May 16, 2002

By Federal Express

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399
Attn.: Reinstatement Department

Re: Hastings Communications, Inc.

Ladies and Gentlemen:

I represent Hastings Communications, Inc. Enclosed please find the following documents:

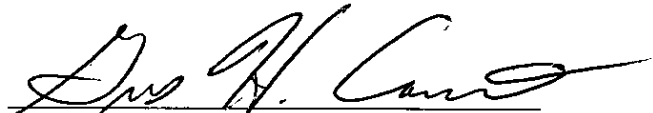
1. Reinstatement form for Hastings Communications, Inc.
2. Statement of Change of Registered Office and Registered Agent.
2. Check in the amount of \$458.75. The amount includes \$450.00 to bring the company current, and 8.75 for a certified copy of the Certificate of Status and Good Standing.

Hastings Communications moved to a new location in the year 2000, and has advised me that they did not receive the notices of uniform business report. Therefore, my client failed to keep itself current with the Secretary of State and was administratively dissolved in the year 2000. My client hereby requests that any penalties be waived since it did not receive the notices of uniform business report. If you have any questions, please feel free to contact me.

Very truly yours,

MORGAN, CARRATT & O'CONNOR, P.A.

By:


Gus H. Carratt, Esq.

GHC:lm
Enclosures
cc: Hastings Communications, Inc.

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of _____
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation : Bostings Communications, Inc
2. The mailing address of the corporation : 2629 NE 14 ST.
FT. Lauderdale
3. Date of incorporation/qualification: 12/07/95 Document number: P95000092937
4. The name and address of the current registered agent and office:
John Andreama
2629 NE 14 ST.
FT. Lauderdale, FL 33304
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)
Louis Andreama
2629 NE 14 ST.
FT. Lauderdale FL 33304

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Louis Andreama
(Signature of an officer, chairman or vice chairman of the board)

5/15/02
(Date)

Louis Andreama CEO
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Louis Andreama
(Signature of Registered Agent)

5/15/02
(Date)

If signing on behalf of an entity:

Louis Andreama
(Typed or Printed Name)

CEO
(Capacity)

* * * FILING FEE: \$35.00 * * *