

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE
		92 AR Gordon B. McMan Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000017499**

1. Corporation Name

PHONE CARD SYSTEMS, INC.

Principal Place of Business

**10740 LOSCO JUNCTION DRIVE
JACKSONVILLE FL 32257**

Mailing Address

**10740 LOSCO JUNCTION DRIVE
JACKSONVILLE FL 32257**

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 02/23/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-3367203	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	SUSSMAN COLLIER, SHANNAN	3165 HIGHLAND DRIVE	SMYRNA GA 30080
D	SUSSMAN, JACK	10740 LOSCO JUNCTION DRIVE	JACKSONVILLE FL 32257
D	SUSSMAN, SHARON	10740 LOSCO JUNCTION DRIVE	JACKSONVILLE FL 32257
			000002344940--8 -11/12/97--01088--015 ****165.00 ****165.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**SUSSMAN, JACK
10740 LOSCO JUNCTION DRIVE
JACKSONVILLE FL 32257**

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

[Signature]

REGISTERED AGENT MUST SIGN

Date **11/3/97**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

97 NOV -7 PM 12:10

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



CP2E040 (8/97)

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PHONE CARD SYSTEMS, INC.

**10740 Losco Junction Drive
Jacksonville, Florida 32257
(904) 262-4424**

November 3, 1997

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327

RE: P96000017499

Dear Sir:

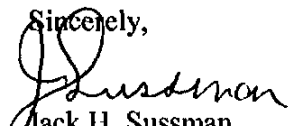
Enclosed is the completed "Application For Reinstatement" along with the Company check for \$165 representing the "Annual Report Fee" and the "Corporate Supplemental Fee."

I respectfully request that the "Reinstatement Fee" of \$585 be waived for the following reasons:

- I do not recall receiving any notice for the earlier filing of the report. I was hospitalized in February of this year and had a prolonged in-home recovery time. I am presently on total disability.
- The company actually began meaningful operations in this year and only established a bank account approximately two months ago.
- The "Reinstatement Fee" represents more than the Company can afford at this time and would impose an undo hardship.

Please accept the enclosed as full payment of our current corporate filing obligation.

Sincerely,


Jack H. Sussman
Resident Agent

Encls