

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR **99**
REINSTATEMENT



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

DOCUMENT # **9980000032589**

1. Corporation Name

World Telecommunications, Inc.

Principal Place of Business

Mailing Address

**3825 HENDERSON BLVD.
SUITE 100
TAMPA, FL 33629**

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

610 OWL WAY

610 OWL WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
SARASOTA, FL

City & State
SARASOTA, FL

Zip
34236

Country
USA

Zip
34236

Country
USA

REINSTATEMENT 99

4. Date Incorporated or Qualified
To Do Business in Florida

04/09/1998 SP

5. FEI Number

59-3513941

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	JOHN D. MANNING	610 OWL WAY	SARASOTA / FL / 34236

**100003061141--1
-12/06/99--01021--024
*****750.00 *****750.00**

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**FREDERICK T. LOWE, Esq.
3825 HENDERSON BLVD.
SUITE 605A
TAMPA, FL 33629**

Name

JOHN MANNING

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

610 OWL WAY

Suite, Apt. #, Etc.

City

SARASOTA

State

FL

Zip Code

34236

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

John D. Manning

REGISTERED AGENT MUST SIGN

Date

November 15, 1999

11. This corporation owes 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:

John D. Manning / Acting President

Date

11/15/1999 (941) 952-1270

Daytime Phone #

CR2501 (12/98)