

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 30 AM 7:06

DOCUMENT # P98000066983

1. Corporation Name

WIRECOM RETAIL SERVICES, INC.

2. Principal Office Address

888 BRICKELL KEY DR.

Suite, Apt. #, etc.

SUITE 2501

City & State

MIAMI FLA

Zip

33131

Country

3. Mailing Office Address

888 BRICKELL KEY DR.

Suite, Apt. #, etc.

SUITE 2501

City & State

MIAMI FLA

Zip

33131

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/26/99

5. FEI Number

52-2107670

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

ROBERT QURESHI

000003299820-5

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

888 BRICKELL KEY DR.

Suite, Apt. #, Etc.

SUITE 2501

City

MIAMI

State

FL

Zip Code

33131

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

X Robert Qureshi

REGISTERED AGENT MUST SIGN

Date

5/12/2000

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

Pres. Robert Qureshi

888 BRICKELL KEY DR.
#2501

MIAMI FLA
33131

Treas. Robert Qureshi

"

"

Sec. Robert Qureshi

"

"

000003299820-5

-06/21/00--01103--014

****150.00 ****150.00

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:

X Robert Qureshi Robert Qureshi

5/12/2000

Date

Daytime Phone #