

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10F2

APPLICATION
REINSTATEMENT

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

DOCUMENT # P98000094027

1. Corporation Name

VIDEOTEK NETWORK CORPORATION

Principal Place of Business

Mailing Address

1111 KANE CONCOURSE 96TH ST
201 F
BAY HARBOR ISLAND FL 33154

21150 POINT PLACE, UNIT #1004
AVENTURA FL 33180

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/05/1998

5. FEI Number

65-0888450

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	LAGUTENKO, ALEX	21150 POINT PLACE, UNIT #1004	AVENTURA FL 33180

980004719609-3
-12/12/01--01004--004
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LAGUTENKO, ALEX
21150 POINT PLACE, UNIT #1004
AVENTURA FL 33180

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

Alex Lagutenko

Date

10/24/2001

REGISTERED AGENT MUST SIGN

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Alex Lagutenko

10/24/2001

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October 24, 2001

Dear sirs:

I never received the original report. You should have my phone number 305-931-6059 or fax# 305-931-0404. I just came down from Europe. Please rectify this problem..

You either lost my check # 1501
or it was stolen. I went to
a bank.

Truly Yours,

Alex Lagutenko.

Alex Lagutenko

VideoTek Network Corp.

This is check # 1502

I am making copies of
everything now. Keep that in mind.