


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION 2000 UBR				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P99000026303					
1. Corporation Name Softnet Communications, Inc.					
2. Principal Office Address 11601 Biscayne Blvd. Suite, Apt. #, etc. Suite 101 City & State Miami, FL Zip 33181 Country U.S.A.			3. Mailing Office Address 11601 Biscayne Blvd. Suite, Apt. #, etc. Suite 101 City & State Miami, FL Zip 33181 Country U.S.A.		

FILED

00 JUN 22 PM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

4. Date Incorporated or Qualified To Do Business in Florida	3/23/99
5. FEI Number	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>	\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent	
Name	Mark Anton
Street Address (P.O. Box Number is Not Acceptable)	11601 Biscayne Blvd.
Suite, Apt. #, Etc.	Suite 101
City	Miami
State	FL
Zip Code	33181

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****158.75 ****158.75

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	Date June 16, 2000
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	
P	Leonard Bierstein	11601 Biscayne Blvd.	Miami, FL 33181
V	Mark Anton	11601 Biscayne Blvd.	Miami, FL 33181
S/T	Sherri E. Paisley	11601 Biscayne Blvd.	Miami, FL 33181

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:	Mark Anton June 16, 2000 981-5516
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
V.P. of Operations	

CR2E081 (9/99)