

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 05, 2007 8:00 A.M.**  
**Secretary of State**

DOCUMENT # p99000054865

1. Corporation Name

**Columbia Telephone & Technology, Inc.**

000092346420  
03/13/07--01014--002 \*\*758.75

**REINSTATEMENT** 03-07

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #

**13361 SW 90 Terrace**

3. Mailing Office Address

**13361 SW 90 Terrace**

Suite, Apt. #, etc.

**D**

Suite, Apt. #, etc.

**D**

City & State

**Miami, Florida**

City & State

**Miami, Florida**

Zip

**33186**

Country

**USA**

Zip

**33186**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**06/16/1999**

5. FEL Number

**65-09819003**

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

**David Gomez**

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

**13361 SW 90 Terrace**

Suite, Apt. #, Etc.

**D**

City

**Miami,**

State

**FL**

Zip Code

**33186**

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

REGISTERED AGENT MUST SIGN

Date **February 28, 2007**

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/t/s/	David G. Gomez V.	13361 SW 90 Terrace #D	Miami, Florida 33186
v	Oscar D. Gomez C.	13361 SW 90 Terrace #D	Miami, Florida 33186
D	Maria del Rocio Gomez C.	13361 SW 90 Terrace #D	Miami, Florida 33186

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 contained in Chapter 119, 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:

*David Gomez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb28, 2007

Date

786-426-3820

Daytime Phone #

3600