

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAR 14 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

02-03

DOCUMENT # S 78594

1. Corporation Name
D T TELECOMMUNICATIONS, INC.

2. Principal Office Address 3. Mailing Office Address

1836 MARLEY PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
LONGWOOD, FLORIDA 32750

City & State

Zip Country Zip Country

4. Date Incorporated or Qualified To Do Business in Florida 9/9/91

5. FEI Number 59-3082554 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
DENNIS N. TAYLOR
Street Address (P.O. Box Number is Not Acceptable)
1836 MARLEY PLACE
Suite, Apt. #, Etc.
City
LONGWOOD
State FL Zip Code 32750

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
606014099986
03/14/03--01103--010 ***300.00

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 D	DENNIS N. TAYLOR	1836 MARLEY PLACE	LONGWOOD, FLORIDA 32750

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: DENNIS N. TAYLOR *Dennis N. Taylor* PRESIDENT 2/18/03 1-800-249-3126
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (10/02)