

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

AND
 FILED

1998 JAN 29 PM 12:47

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

APPLICATION
 FOR ⁹⁸ REINSTATEMENT

DOCUMENT # **V5 3929**

1. Corporation Name
World Affairs Television Productions (USA) Inc.

Principal Place of Business 100 N. Collier Blvd. Suite 1105 Marci Island, FL 34145	Mailing Address c/o C.T. Corporation System 1200 S. Pine Island Road Plantation, FL 33324
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 600 de Maisonneuve West	3. New Mailing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida 7/29/1992
Suite, Apt. #, etc. Suite 3230	Suite, Apt. #, etc.	5. FEI Number 65-0553779
City & State Montreal, Quebec	City & State	Applied For Not Applicable
Zip H3A 3J2	Country Canada	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres/Dir.	Larry J. Shapiro	4854 Cote des Neiges Suite 2015	Montreal, Canada H3V 1G7
			200002420352--1 -02/03/98--01091--019 ***1050.00 ***1050.00
			REINSTATEMENT <i>06-28-98</i> <i>160</i> <i>1/29/98</i>

8. Name and Address of Current Registered Agent

CT Corporation System
 1200 South Pine Island Road
 Plantation, FL 33324

9. Name and Address of New Registered Agent

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 *Connie Bryan*

REGISTERED AGENT MUST SIGN

Date **1-29-98**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on intangible tax.)

12. 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: *Larry J. Shapiro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **1-29-98** Daytime Phone # **514-847-2970**

CR2E040 (1/98)