
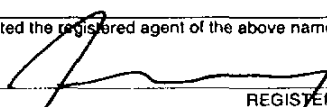
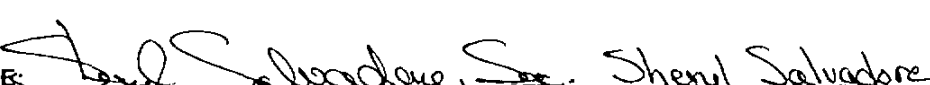


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> DIVISION OF CORPORATIONS	
<b>DOCUMENT # M83184</b>					
1. Corporation Name Art, Music & Entertainment, Inc.					
Principal Place of Business 4400 W Sample Rd Ste 140 Coconut Creek, 33073			Mailing Address 4400 W Sample Rd Ste 140 Coconut Creek, 33073		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable 320 Barlow Ave. Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable 320 Barlow Ave. Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 5/25/88	
City & State Sarasota, FL		City & State Sarasota, FL		5. FEI Number 59-2960590	
Zip 34232 Country US		Zip 34232 Country US		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		
DP	Joseph A. Bruno Jr.	320 Barlow Ave.	Sarasota, FL 34232		
DS	Sheryl Salvadore	320 Barlow Ave.	Sarasota, FL 34232		
<b>REINSTATEMENT 98-99 TB 5/13/99</b>					
600002883286--7 -05/24/99--01005--009 ****900.00 ****900.00					
8. Name and Address of Current Registered Agent Avis, Richard T. 1325 Snell Isle Blvd NE Ste 205C St. Petersburg, FL 33704			9. Name and Address of New Registered Agent Name Drakeford & Drakeford P.A. Drakeford, Walter H.C. Street Address (P.O. Box Number is Not Acceptable) 2212 E 4th Ave. Suite, Apt. #, Etc. City Tampa State FL Zip Code 33605		
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 			Date 4/20/99		
REGISTERED AGENT MUST SIGN					
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input type="checkbox"/> (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:  Sheryl Salvadore Date 4/13/99 941-378-8110 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					

99 MAY -7 01 09:06  
 TALLAHASSEE, FLORIDA

CR2E087/12/98