


# 2007 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P0000105675</b> 1. Entity Name <b>SENSATIONAL VIDEO &amp; MUSIC, INC.</b>	
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
**07 OCT 10 PM 1:09**

Principal Place of Business <b>3108 WEST 76TH ST HIALEAH, FL 33018</b>	Mailing Address <del><b>3108 WEST 76TH ST HIALEAH, FL 33018</b></del>
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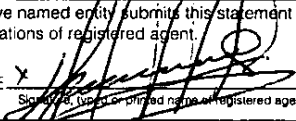
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address <b>8914 N.W. 168 Street</b>  Suite, Apt. #, etc.
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10092007 REIN-P CR2E098 (1/07)

City & State <b>Hialeah Florida</b>	4. FEI Number <b>65-1054094</b>	Applied For <input type="checkbox"/> Not Applicable
Zip <b>33018</b>	Country <b>U.S.A.</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>

<b>6. Name and Address of Current Registered Agent</b>  <del><b>RODRIGUEZ, HENRY 3108 WEST 76TH ST HIALEAH, FL 33018</b></del>	<b>7. Name and Address of New Registered Agent</b> Name <b>LARRY RODRIGUEZ</b> Street Address (P.O. Box Number is Not Acceptable) <b>8914 N.W. 168 Street</b> City <b>Hialeah</b> <b>FL</b> Zip Code <b>33018</b>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE   DATE **10/9/07**

(NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After January 1, 2008, Fee will be \$300.00</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <del><b>VILLARROEL, JANET 2238 MONROE STREET HOLLYWOOD, FL 33020</b></del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <del><b>RODRIGUEZ, HENRY 3108 WEST 76 ST. HIALEAH, FL 33018</b></del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <b>VILLARROEL, JANET</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8914 NW 168 Street Hialeah Fl 33018</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>LARRY RODRIGUEZ</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8914 NW 168 Street Hialeah Fl 33018</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <p style="font-size: 2em; text-align: center;">PS 10/13/07</p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <p style="font-size: 2em; text-align: center;"><b>REINSTATEMENT 07</b></p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <p style="font-size: 1.5em; text-align: center;">400110952764 10/18/07--01036--013 **150.00</p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:   DATE: **10-09-2007** 786 419 3559

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR