## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION ... FOR ... REINSTATEMENT



8. Name and Address of Current Registered Agent

## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F	202000106347
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1. Corporation Name

CATALYST HOLDINGS, INC.

Principal Place of Business

Mailing Address

-5290 <del>XIDDLE COURT</del> -ORLANDO FL 32811 5280 MIDDLE COURT ORLANDO FL 32811 REINSTATEMENT

03 OCT 30 PM 12: 22

SECHETARY OF STATE : FALLAHASSEE, FLORIDA

If above addresses are incorrect in any way, fine through incorrect information and enter correction below.										
<u> </u>			New Mailing Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida     10/02/2002				
Suite, Apt. #, etc.		Suite, Apt. #, etc. Studio								
845 N	. Garland Ave Studio 1000	845 N	1. Garlo	and Ave 100	2 D	5. FEI Number		<u></u>	Applied For	
City & State		City & State						Not Applicable		
Orlando, FI		Orlando, 1-1			6					
Zip 328	OI USA	Zip 32301		Country			OF STATUS DESIRE	S8.75 Addit	ional Fee required ificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)										
Title(s)	Name of Officers and/or Directors		3	Street Address Officer and/or [			4	City / State / Zip		
D	SANCHEZ, JAY		5280 MI	DDLE COURT			ORLANDO FL	32811	-	
					<del>"</del>					
				:				15476		
			-					<u> </u>	!	

HABER, LAWRENCE H ESQ

606 FRONT STREET

CELEBRATION FL 34747-0171

Suite, Apt. #, Etc.

City

State | Zip Code | FL

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. or 617.0505, F.S.

Signature of Registered Agent



Date 10 1 23/13 407 405 864 16

11. 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:

SIGNATURE REQUESTION SIGNATURE AND TYPED ON PRINTED NAME OF STORING OFFICER OR DIRECTOR

10 23 03 40 425 SCHC

9. Name and Address of New Registered Agent



Divisions of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, FI 32314-6327

The Lab **407.425.5646** 

Facsimile 407.425.7156

US Watts 866,425,LOGO To Whom It May Concern:

845 N. Garland Ave. Studio 100D Orlando, FL 32801 I am contacting you regarding a recent penalty for failure to file the annual state corporate fees. As stated before in a letter to Justin Shivers, we did not receive the first set of paperwork for the Catalyst Studio Corporation renewal until after the deadline had passed. Earlier we sent a letter notifying to the Division of Corporations about our address change. This too was not applied which is why we did not receive the original annual forms. Upon second notice, we immediately sent you the full payment and cover letter explaining reasons for the late payment. Furthermore, it was explained to us on the phone that we would not have to pay additional fees as long as we sent in the \$150.00 for renewal which we did and was processed by your state agency. However, we recently received a notice of administrative dissolution of revocation. Please see the attached original letter of address change notification and applications for reinstatement of corporations, as per Ladell Bryant on 10/23/2003 1:56pm.

Thank yo

J Sanchez

CEO Catalyst Holdings Inc. Doc # P02000106347

The Catalyst Studio Corporation. Doc # P01000025675 Catalyst Entertainment Inc. Doc # P020001041093