

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

APPROVED
AND
FILED
98 NOV 23 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000082427**

1. Corporation Name

AA FUN TIME PROMOTION, INC.

Principal Place of Business

Mailing Address

637 NE 42ND ST
FT LAUDERDALE FL 33334

637 NE 42ND ST
FT LAUDERDALE FL 33334



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 11/10/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0543209	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	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
D	HOWAYECK, ROBERT	637 NE 42ND ST	FT LAUDERDALE FL 33334

9000002699579--6
-12/01/98--01083--022
****150.00 ****150.00

11/125

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
HOWAYECK, ROBERT 637 NE 42ND ST FT LAUDERDALE FL 33334		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.

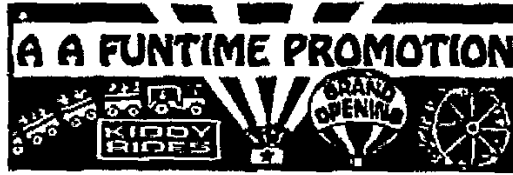
Signature of Registered Agent *[Signature]* **SIGNATURE REQUIRED** Date 11-18-98
 REGISTERED AGENT MUST SIGN

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: *[Signature]* **SIGNATURE REQUIRED** Date 11-18-98 (954) 566-3109
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR20040 (9/98)



A A Funtime Promotion, Inc. • 637 N.E. 42nd Street • Fort Lauderdale, FL 33334
Phone (954) 566-3109 • 1-800-563-3493 • Fax (954) 563-2057 • E-mail: funtime@hotmail.com

November 18, 1998

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Document # P94000082427

Dear sir or madam,

Please be advised that we did not receive our 1998 Corporation Annual Report. Enclosed please find completed Reinstatement Application along with a check in the amount of \$150.00 for payment of appropriate Annual Report Fees. Per a phone conversation with your office, please accept this letter as documentation of non-receipt and please reverse administrative dissolution as soon as possible.

Best regards,
AA Funtime Promotions, Inc.

Robert E. Howayeck
President

RH/nsk