PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

01/02 WOOD

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 FEB 25 PM 12:34

DOCUMENT # P98000055797

1. Corporation Name: Source For Music, Inc.

200005044562--4
-03/06/02--01005--019
****300.00 ****300.00

2. Principal Office Address	**3.** Mailing Office Address
400 NW 103 Terrace	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pembroke Pines, FL	City & State: SAME
Zip: 33026 Country: USA	Zip: SAME Country: SAME

4. Date Incorporated or Qualified To Do Business in Florida: 1998

5. FEI Number: 65-0847953 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: DAVID SCOTT ~~SAME AS ABOVE~~

Street Address (P.O. Box Number is Not Acceptable): 400 NW 103 Terrace

Suite, Apt. #, Etc.:

City: Pembroke Pines | State: FL | Zip Code: 33026

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: David Scott Date: 2/6/02
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pr	DAVID SCOTT	400 NW 103 Terrace	Pembroke Pines, FL 33026

10. 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: David Scott DAVID SCOTT 1/22/02 954 261 6254
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

400 NW 103 TERRACE
PEMBROKE PINES, FL 33026
954-261-6254
sourcefor@aol.com

Dear Sir or Madam:

Please be advised that I have not received my documents for my 2001/2002 registrations. I am enclosing a check for $300 for 2001/2002 registrations as well as the form as instructed by one of your agents. I had a telephone conversation with one of your agents stating that the forms were returned to you undeliverable. The address is the same as the above address and the company has NOT been dissolved. Thank you in advance for handling this matter.

Sincerely,

David Scott

FEI- 65-0847953

1-22-02