

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 467564

1. Corporation Name

MOVIE FILM SERVICE CORP.

Principal Place of Business

Mailing Address

2013 HARDING ST
HOLLYWOOD FL 33020

2013 HARDING ST
HOLLYWOOD FL 33020

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

2. New Principal Office Address, If Applicable

3780 SW 30 AVE.

3. New Mailing Office Address, If Applicable

3780 SW 30 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FT. LAUDERDALE, FL. FT. LAUDERDALE, FL

Zip

Country

Zip

Country

33312

USA

33312

USA

4. Date Incorporated or Qualified
To Do Business in Florida

01/16/1975

5. FEI Number

59-1584615

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$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	4 City / State / Zip
PTD	LEVINE, PAUL	2013 HARDING ST 3780 SW 30 AVE.	HOLLYWOOD FL 33020 FT. LAUDERDALE, FL 33312
SD	LEVINE, BARBARA	2013 HARDING ST 3780 SW 30 AVE.	HOLLYWOOD FL 33020 FT. LAUDERDALE, FL 33312

900038425819
06/29/04--01060--004 **308.75

REINSTATEMENT 03-04

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LEVINE, PAUL

2013 HARDING ST.

HOLLYWOOD FL 33020

Name

Street Address (P.O. Box Number is Not Acceptable)

3780 SW 30 AVENUE

Suite, Apt. #, Etc.

City

FT. LAUDERDALE

State

FL

Zip Code

33312

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

6/23/04

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 REQUIRED
PAUL LEVINE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/23/04 954-321-8883

Daytime Phone #



Movie Film Services

3780 S.W. 30th Avenue
Ft. Lauderdale, FL 33312
954-321-8883
Fax 954-321-8703

June 24, 2004

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

RE: Movie Film Service Corp.
FEIN #59-1584615
Document #467564

Gentlemen:

Confirming my conversation with Gary Brankenbaker of your office today,
We moved our offices to a new building in 2003 and we did not receive our
Notice of renewal-uniform business Report – for 2003. We have just recently
Received the reinstatement application which was mailed to our new address
But still had our old address on it..

I have completed the reinstatement form and have indicated the new address for both
Mailing and principal place of business, it has been signed by Mr. Levine, and we
Are including our check #5530 for \$308.75, which includes the fee for 2003 and 2004 of
\$150 each and \$8.75 to send us a certificate of status.

Please process this as soon as possible. If you need anything further, please advise
Us accordingly.

Sincerely,


Mickey Anderson
Office Manager

MA:am

Enclosures