

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

1997 NOV 19 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **809334**

1. Corporation Name

UNIVERSAL FILM EXCHANGES INC

Principal Place of Business

100 UNIVERSAL CITY PLAZA
UNIVERSAL CITY CALIFORNIA 91608
US

Mailing Address

ATTN: TAX DEPT
100 UNIVERSAL CITY PLAZA
UNIVERSAL CITY CALIFORNIA 91608
US



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/07/1953

5. FEI Number

13-1428850

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
VD	SMITH, GEORGE <i>Bruce L. Hack</i>	100 UNIVERSAL CITY PLAZA	UNIVERSAL CITY CA
T	BAKER, RICHARD E. <i>Pamela F. Cherney</i>	100 UNIVERSAL CITY PLAZA	UNIVERSAL CITY CA
P	MOUND, FRED <i>Domenique N. Rocco</i>	100 UNIVERSAL CITY PLAZA	UNIVERSAL CITY CA
SD	SAMUEL, MICHAEL <i>Sharon S. Garcia</i>	100 UNIVERSAL CITY PLAZA	UNIVERSAL CITY CA
S			
V	Paul Boscermi	800 Third Avenue	New York, NY 10022

8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

Suite, Apt. #, Etc.

City

REINSTATEMENT

900002354559--4

11/21/97--01104--006

****750.00

****750.00

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.

Signature of
Registered Agent

Vicky Goldstein

VICKY GOLDSTEIN
SPECIAL ASSISTANT SECRETARY

Date

11/3/97

THE 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:

Paul Boscermi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/12/97
Date

(202) 572-7621
Daytime Phone #

CR2E040 (8/97)