

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

2008 FEB 29 PM 2:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F02000004893

1. Corporation Name

Artisan Filmed Productions, Inc.

700119103497
02/29/08--01008--004 **758.75

2. Principal Office Address - No P.O. Box #
2700 Colorado Avenue

3. Mailing Office Address
2700 Colorado Avenue

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
Suite 200

City & State
Santa Monica, CA

City & State
Santa Monica, CA

Zip
90404

Country
USA

Zip
90404

Country
USA

4. Date Incorporated or Qualified To Do Business in Florida 09/25/2002

5. FEI Number
954518145

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$0.75 Additional Fee required for a Certificate of Status

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

7. Name and Address of Current Registered Agent

Name
NRAI Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)
2731 Executive Park Drive

Suite, Apt. #, Etc.
Suite 4

City
Weston

State
FL

Zip Code
33331

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

Robert Gray
REGISTERED AGENT MUST SIGN

Date 12/12/07

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO	Jon Feltheimer	2700 Colorado Avenue, Suite 200	Santa Monica, CA 90404
SEC	Jim Keegan	2700 Colorado Avenue, Suite 200	Santa Monica, CA 90404
Pres	Jon Feltheimer	2700 Colorado Avenue, Suite 200	Santa Monica, CA 90404
VP	Wayne Levin	2700 Colorado Avenue, Suite 200	Santa Monica, CA 90404
Treas	Jim Keegan	2700 Colorado Avenue, Suite 200	Santa Monica, CA 90404

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 contained in Chapter 119, 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:

Wayne Levin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-08

Date

310-255-3863

Daytime Phone #

2129