API	PLEASE READ	ALL INSTRUCTION FLORIDA DEPARTM	IENT OF STATE	OMPLET	ING THIS FORM	103
	FOR	Katherine		f. 3.	FILED ;	
200	O UBR - 🞾	Secretary of Solution of Cori		00.11	0U 00 DH I.EO	
DOCI	JMENT # G617 3	37		UU.N	OV 20 PM 4: 59	
1. Corporation Name				SECRETARY OF STATE. TALLAHASSEE, FLORIDA		
BODINE	E STUDIOS, INC:			IALL	AHASSEE, FLORIDA	
Principal Pl	ace of Business	Mailing Address				
SUITE 3-H SUITE 3-H		220 CENTRAL PARK SOUTH SUITE 3-H NEW YORK NY 10019				
2. New Prin	ddresses are incorrect in any way, line thr ncipal Office Address, If Applicable	3. New Mailing Office Address			orated or Qualified ness in Florida 09	/29/1983
4066 Jewfish Dr. 406			6 Jewfish Dr. 5. F			Applied For
City & State City & State		1 0 - 1111/			59-2377905	Not Applicable
Zip 346	07 Country USA	Zip 34607 Col	untry US A			75 Additional Fee require for a Certificate of Status
7. Names a	and Street Addresses of Each Officer and	or Director (Florida nonprofit corp				
Title(s)	Name of Officers and/or Directors 2	3	Street Address of Each Officer and/or Director		City / S	tate / Zip
PD	BODINE, EDMUND J., JR.	220 CENTRAL 4066 3	PARK SOUTH SUITE Jew Yish [E3H)r.	Spring Hi	11, FL 3460°
			<u></u>			
	I			170 t	hooossos	7299

	900035057299 -12/19/0001053002 ****150:00 ****150:00			
Name and Address of Current Registered Agent	Name and Address of New Registered Agent			
BODINE, EDMUND J., JR. —— Same ————————————————————————————————————	Name Edmund J. Bodine Jr. Street Address (P.O. Box Number is Not Acceptable) 40 66 Jew fish Dr. Suite, Apt. #, Etc.			

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.

o. I, being appointed		and an internal transmit and accept the configuration of the	,		
ignature of tegistered Agent	SAMORIZE	REQUIRED	Date	15 NOU.	2000
.ogistorou / igorik	REGISTERED AGEN				

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 filling 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.



15 NOV. 2000

Hill

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Zip Code 34607

CR2E040 (8/00)

4066 Jewfish Drive Spring Hill, Florida 34607

November 16, 2000

Division of Corporations Annual Report/Reinstatement Section P. O. Box 6327 Tallahassee, FL 32314

To Whom it May Concern,

I called your office yesterday and discussed with them the problem I had with respect to non-filing of the annual corporate report and fees. They advised me to send this letter and explanation of the facts, along with the check for \$150.00 for the 2000 corporate report filing.

In January 2000, I sent a change of address to your office (copy enclosed) for my three Florida corporations. I never received the reporting documents for 2000. Within this past week from New York, I was forwarded the dissolution notice.

I have always paid my bills for this corporation and am respectfully requesting that the penalty fees be waived and the corporation be restored.

Thank you for your kind consideration of my request.

Sincerely,

Edmund J. Bodine,

President