PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 NOV 14 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K63445

1. Corporation Name
Video Encounters, Inc.

Principal Place of Business
c/o Marilyn Trognitz
8280 Princeton Square Blvd
West #4
Jacksonville, FL 32256

Mailing Address
(same as principal place of business)

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

REINSTATEMENT 1994-1996
mwb
11-18-96
DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable
7261 Plantation Rd
Suite, Apt. #, etc.
Suite L
City & State
Pensacola, FL
Zip 32504 Country USA

3. New Mailing Address, If Applicable
P.O. Box 10426
Suite, Apt. #, etc.
City & State
Pensacola, FL
Zip 32524 Country USA

4. Date Incorporated or Qualified To Do Business in Florida 1/31/89

5. FEI Number
59-2931516
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑

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
P/T S/D	David J. Maloney	8121 Pompano Street	Navarre, FL 32566

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11/19/96--01148--018
****783.75 ****783.75

8. Name and Address of Current Registered Agent
Marilyn Trognitz
8280 Princeton Square Blvd
West #4
Jacksonville, FL 32256

9. Name and Address of New Registered Agent
Name: Keith A. McIver, Esquire
Street Address (P.O. Box Number is Not Acceptable): 101 E. Government Street
Suite, Apt. #, Etc.:
City: Pensacola State: FL Zip Code: 32501

CR2E040 (1/96)

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 [signature] REGISTERED AGENT MUST SIGN
Date 11/7/96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☑
(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director of 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.; and that all fees owed by the corporation have been paid. 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] Pres. D. Maloney, Pres. 11/4/96 205 323-3365
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #