

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

06 JAN 10 PM 3:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L06059

1. Corporation Name

PARIS PRODUCTIONS, INC.

**REINSTATEMENT** 01-05

CR2E081 (8/05)

2. Principal Office Address 719 N.E. 82 Street Suite, Apt. #, etc.		3. Mailing Office Address Suite, Apt. #, etc.	
City & State Miami, FL		City & State F	
Zip 33138	Country USA	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida	07/31/1989
5. FEI Number	650154004
<input type="checkbox"/> Applied For	<input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name	Marie-Ange Ripka	600062570128
Street Address (P.O. Box Number is Not Acceptable)	719 N.E. 82 Street	01/03/06--01050--006 *\$750.00
Suite, Apt. #, Etc.		
City	Miami,	State FL Zip Code 33138

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: Marie-Ange Ripka Date: 12-25-05

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P/S	Marie Ange Ripka	719 N.E. 82 Street	Miami, FL 33138

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 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: Marie-Ange Ripka Date: 12-25-05 Daytime Phone #: 305 759 5024

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2001 Reports Returned by P.O. Jm

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LAGUNA LAW OFFICES, P.A.  
Attorneys at Law  
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(305) 596-5202  
(305) 596-7835 (fax)

December 15, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Reinstatement of Paris Productions, Inc./Request  
for Waiver of Late Fees

To Whom It May Concern:

Enclosed please find a corporation reinstatement form for Paris Productions, Inc., as well as our check in the amount of \$750.00 representing the filing fees for the years 2001 - 2005, inclusive.


We are respectfully requesting that your office waive the late fees due to the fact that said corporation never received any notices from your office. It had moved from the listed address of 9955 S.W. 74 Street, Miami, FL 33173, and, for some unknown reason, your notices were not forwarded. Furthermore, your online information shows a mailing address for the corporation c/o Jack L. Weitzman, Esq., 11555 S.W. 82 Avenue, Miami, FL 33156. That is me, the undersigned. I have never had that address, either for residence or business.

Ms. Ripke, the principal of Paris Productions, Inc., would have never allowed her company to be administratively dissolved had she received any notice of intent to dissolve.

Therefore, please be so kind as to waive the late fees.

Thank you for your consideration of this request and your anticipated favorable decision.

Very truly yours,

  
Jack L. Weitzman

JLW/kw

Enclosures