

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

05 SEP -7 PM 2:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L21379

1. Corporation Name

MaKin' Music Inc.

000059376020  
09/07/05--01010--001 \*\*750.00

2. Principal Office Address

311 N. Broad St

Suite, Apt. #, etc.

City & State

Brooksville, FL

Zip

34601

Country

Hernando

3. Mailing Office Address

311 N. Broad St

Suite, Apt. #, etc.

City & State

Brooksville, FL

Zip

34601

Country

Hernando

4. Date Incorporated or Qualified  
To Do Business in Florida

1996

5. FEI Number

59-2971582

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Robert J. Neale

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

410 S. Armenia Ave.

Suite, Apt. #, Etc.

#926

City

Tampa

State

FL

Zip Code

33609

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

9/1/05

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
Pres.	Robert J. Neale	410 S. Armenia Ave #926	Tampa, FL 33609

**REINSTATEMENT**

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:

[Signature] Robert J. Neale

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/1/05 352-796-0668

Daytime Phone #

CR2E081 (01/05)

**Makin' Music Inc.**  
**311 N. Broad Street**  
**Brooksville, FL 34601**  
**(352) 796-0668**

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

August 5th, 2005

To Whom It May Concern:

We are requesting a reinstatement of the Makin' Music Corporation. We were unaware that our registration had lapsed as it is filed by our accountant who is now deceased.

We are requesting a waiver of the penalty fee as we did not receive any registration notices as they were returned to your offices.

Thank you for your consideration.

Robert Neale



President  
Makin' Music Inc.