

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**  
**00 FEB 29 PM 4:37**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

DOCUMENT # M09659

1. Corporation Name

E.D. Video Productions, Inc.

Principal Place of Business

Mailing Address

751 Park of Commerce Drive  
#120  
Boca Raton, FL 33487

751 Park of Commerce Dr.  
#120  
Boca Raton, FL 33487

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable  
824 S.E. 9th Street

3. New Mailing Address, If Applicable  
824 S.E. 9th Street

4. Date Incorporated or Qualified  
To Do Business in Florida 01.07.85

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State  
Deerfield Beach Florida

City & State  
Deerfield Beach, Florida

59-2512503

Not Applicable

Zip 33441

Country USA

Zip 33441

Country USA

CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required  
for a Certificate of Status**

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P/S	David L. Gonzalez	824 S.E. 9th Street	Deerfield Beach FL 33441

**REINSTATEMENT**

97-2000

4000003156174-5

03/03/00--01039--009

\*\*\*1200:00 \*\*\*1200:00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

David L. Gonzalez  
931 S.E. 7th Court  
Deerfield Beach, Florida 33441

Name David L. Gonzalez  
Street Address (P.O. Box Number is Not Acceptable)  
824 S.E. 9th Street  
Suite, Apt. #, Etc.

City Deerfield Beach

State FL

Zip Code 33441

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

REGISTERED AGENT MUST SIGN

Date

2/22/2000

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

S. PAYNE

FEB 29 2000

(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 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., 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:

President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/22/2000 951-427-2522

CR2E040 (12/95)