

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M92761**

1. Corporation Name

MUSIC ENTERTAINMENT, INC.

Principal Place of Business

Mailing Address

**9516 S.W. 8TH STREET
PEMBROKE PINES FL 33025**

**9516 S.W. 8TH STREET
PEMBROKE PINES FL 33025**

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/31/1988

5. FEI Number

65-2259890

Applied For

Not Applicable

6.

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 3	City / State / Zip 4
P	HOUGHTALING, FRANK	9516 S.W. 8TH STREET	PEMBROKE PINES FL 33025

900023924309
10/20/03--01008--002 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**HOUGHTALING, FRANK
9516 S.W. 8TH STREET
PEMBROKE PINES FL 33025**

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date **10-14-03**

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 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 REQUIRED
FRANK Houghtaling
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-684-7224

10-14-03

CR2E040 (7/03)

Music Entertainment, Inc.

Professional Sound &
Light Equipment for the
Entertainment Trade

9516 S.W. 8 Street • Pembroke Pines, FL 33025 • • • (954) 435-4186 • Frank Houghtaling

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To Division of Corporations

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I did not receive the form for the Annual Report, Please reinstate Music Entertainment Inc. And waive any reinstatement fees. For any additional information please call me on my cel 954-684-7224

President/Owner

I AM THE ONE
Frank Houghtaling

Frank Houghtaling

