PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUL 18 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800057601708
07/18/05--01039--004 **297.50

REINSTATEMENT 04-05

DOCUMENT # N00000001379

1. Corporation Name
StARLights PerFormance Arts Inc

2. Principal Office Address	3. Mailing Office Address
2342 13th St 50	2342 13th St 58
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Petersburg Fl	City & State: St. Petersburg Fl
Zip: 33705 Country: Pinellas	Zip: 33705 Country: Pinellas

4. Date Incorporated or Qualified To Do Business in Florida: 2-25-2000

5. FEI Number: 593637329 ☐ 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: Deloris Green-Foster

Street Address (P.O. Box Number is Not Acceptable): 2342 13th St 50

Suite, Apt. #, Etc.:

City: St. Petersburg | State: FL | Zip Code: 33705

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: Deloris Green-Foster — REGISTERED AGENT MUST SIGN

Date: 7-11-05

CR2E081 (01/05)

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
President	Deloris Green-Foster	2342 13th St 50	St. Petersburg Fl 33705
Director	Earl Presley	3759 29th Ave South	St. Petersburg, FL 33711
Director	Anthony Hawthorne	3540 50nd St N	St. Petersburg FL 33710
Director	Michelle F. Mann	3700 8th Street South	St. Petersburg, FL 33705

7/21

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: Deloris Green-Foster — 7-11-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #