

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01000004344

1. Corporation Name

NU LOOK DANCE THEATRE, INC.

2. Principal Office Address

6277 OLD WINTER GARDEN ROAD

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32835

Country

3. Mailing Office Address

6277 OLD WINTER GARDEN ROAD

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32835

Country

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

5. FEI Number

74-3015845

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
CASEY HUMPHREY LEE

Street Address (P.O. Box Number is Not Acceptable)
240 HAWTHORNE GROVES BOULEVARD

Suite, Apt. #, Etc.
102

City
ORLANDO

State
FL

Zip Code
32835

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

REGISTERED AGENT MUST SIGN

Date 02/08/06

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
P	CAROL CUDJOE	74 LANCER OAK DRIVE	APOPKA, FL 32712
M	HOMER HARTAGE	201 S. ROSALIND AVE, FIFTH FLOOR	ORLANDO, FL 32801
M	ERROL GREENIDGE	1525 FLOWERDALE DRIVE	ORLANDO, FL

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 contained in Chapter 119, 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:

CAROL CUDJOE

02-08-06

407-299-1500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



Nulook Dance Theatre, Inc

6277 Old Winter Garden Road, Orlando, FL 32835
407-299-1500 Office ■ 407-299-1577 Fax

February 9, 2006

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

Re: N01000004344
Nu Look Dance Theatre, Inc – Reinstatement

To Whom It May Concern:

Please note that Nu Look Dance Theatre, Inc. did not receive notice to file Annual Reports. We are requesting that the \$175.00 fee be waived.

Enclosed are all necessary forms and payment for the reinstatement of the incorporation of Nu Look Dance Theatre, Inc.

Please contact my office with any questions or concerns.

Thank you,

Carol Cudjoe
President