

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN 29 PM 4:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000006379

1. Corporation Name

ENTER STARDOM PRODUCTIONS, INC.

2. Principal Office Address

2202 NW 22nd Way

3. Mailing Office Address

2202 NW 22nd Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boynton Beach, FL

City & State

Boynton Beach, FL

Zip

33436

Country

Palm Beach

Zip

33436

Country

Palm Beach

4. Date Incorporated or Qualified
To Do Business in Florida

May 21, 2001

5. FEI Number

65-1109300

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

BEATRICE GAVIRIA

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

6468 APACHE BLVD.

Suite, Apt. #, Etc.

City

LOXAHATCHEE

State

FL

Zip Code

33470

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

Beatrice Gavia

REGISTERED AGENT MUST SIGN

Date

1/27/04

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
TD	SANTOS, MILTON	6166 SEVEN SPRINGS BLVD.	GREENACRES, FL 33463
PRES	GROSS, DUANE	2202 NW 22ND WAY	BOYNTON BEACH, FL 33436
VP	GAVIRIA, BEATRICE	6468 APACHE BLVD.	LOXAHATCHEE, FL 33470
SD	TORRES, CARMEN	6490 APACHE BLVD.	LOXAHATCHEE, FL 33470

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

Duane L. Gross

DUANE L. GROSS

1/27/04

(561) 731-1687

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)