

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000030354

1. Corporation Name

AUDIO VIDEO ENTERPRISES, INC.

Principal Place of Business

Mailing Address

4301 W. VICE ST., UNIT C-52
KISSIMMEE FL 34746

4301 W. VICE ST., UNIT C-52
KISSIMMEE FL 34746

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

2. New Principal Office Address, If Applicable

4301 W. Vine ST.

Suite, Apt. #, etc.

Unit C-52

City & State
Kissimmee, FL.

Zip
34746

Country
Osceola

3. New Mailing Office Address, If Applicable

348 Tangerine ST.

Suite, Apt. #, etc.

City & State
Altamonte Spring, FL.

Zip
32701

Country
Seminole

4. Date Incorporated or Qualified
To Do Business in Florida

03/20/2000

5. FEI Number

59-3631998

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	KURDY, JOSEPH	348 TANGERINE ST.	ALTAMONTE SPRINGS FL 32701
		Tangerine	
			900004745049--0 -12/31/01--01064--006 ****158.75 ****158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KURDY, JOSEPH
4301 W. VICE ST., UNIT C-52
KISSIMMEE FL 34746

Name

Kurdy Joseph

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

348 Tangerine ST.

Suite, Apt. #, Etc.

City

Altamonte Spring, Fl.

State

FL

Zip Code

32701

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10/15/01

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Kurdy

Date

Daytime Phone #

10/15/01

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10/15/01

AUDIO VIDEO ENTERPRISES, INC.
4301 WEST VINE STREET SUITE C-52
KISSIMMEE, FLORIDA 34746
(407) 390-7333

This is to advise you that I have not received a renewal application prior to notice. the notice of dissolution or revocation" is the first correspondence I have received. As it appears there is a missprint or an error with the street name, Vine St. you have listed as vice St.. Corretion has bee made on the application for reinstatment.

Joseph Kardy (President)
