

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 APR 17 AM 9:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000037310

1. Corporation Name

Category 5 Films, INC.

2. Principal Office Address

2915 E. Jefferson St.

3. Mailing Office Address

2915 E. Jefferson St.

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32803

Country

USA

Zip

32803

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

April 13, 2000

5. FEI Number

59-3648774

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

Scott M. Goldberg

200005413062--2

-05/01/02--01088--012

\*\*\*\*300.00 \*\*\*300.00

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

1000 Universal Studios Plaza

Suite, Apt. #, Etc.

Building 22A, Suite 247

City

Orlando

State

FL

Zip Code

32819-7610

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

*Scott M. Goldberg*

REGISTERED AGENT MUST SIGN

Date

1/24/02

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
PD	Patrick D. Gibson	2915 E. Jefferson St.	Orlando, FL 32803
VSD	Michael P. Lapointe	1633 Rose Drive	Lakeland, FL 32813
TD	Mike B. Marshall	2102 Gatchet Ct. Apt. 204	Orlando FL 32807

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:

*Patrick D. Gibson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-10-02

Daytime Phone #

407-893-4598

CR2E081 (9/01)