


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 22 PM 4:24

DOCUMENT # P00000070613

1. Corporation Name

PARASOL FILMS II, INC.

Principal Place of Business

Mailing Address

1940 HOLLYWOOD STREET #201
HOLLYWOOD FL 33020

1940 HOLLYWOOD STREET #201
HOLLYWOOD FL 33020

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

2. New Principal Office Address, if Applicable
5606 hollywood Blvd

3. New Mailing Office Address, if Applicable
5606 hollywood Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Hollywood FL

Hollywood FL

City & State

City & State

33021 USA

33021 USA

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/25/2000

5. FEI Number

65-109-8187

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
1	2	3	4
P	Erik Baquero	5606 Hollywood Blvd Hollywood FL 33021	Hollywood FL 33021

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FOX-BUTLER, PATRICIA
KIPNIS TESCHER LPPMAN & VALINSKY, P.A.
100 NE THIRD AVENUE SUITE 610
FORT LAUDERDALE FL 33301

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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.

AD

Signature of
Registered Agent

Patricia Fox Butler
REGISTERED AGENT MUST SIGN

Date

10-10-07

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:

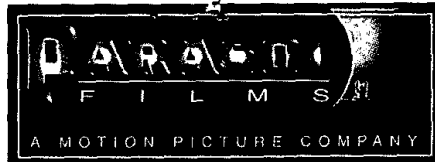
[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/10/01

Date

954-577-9025

Daytime Phone #



October 18, 2001

DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314-6327

To Whom It May Concern:

Please find enclosed Document # P00000070613 filled out with the information required from your office.

Note: This form was filed and the fee paid for prior to its due date. Also, (to the best of our knowledge) the form was completely filled out including the FEI number. No requested for a filing was received by our office regarding the absent FEI number. Due to this fact we expect to have any penalty fees waived.

Thank you.

Best regards,

A handwritten signature in black ink, appearing to read "Erik Baquero", is written over a horizontal line.

Erik Baquero
CEO & President
Parasol Films II, LLC