

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 MAY -7 PM 3:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P 00000071510

1. Corporation Name

SPEX RECORDS, INC

2. Principal Office Address

5764 GRAND CANYON

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

ORLANDO FL

City & State

Zip

Country

32810

USA

200035763922  
05/07/04--01073--019 \*\*600.00

4. Date Incorporated or Qualified  
To Do Business in Florida

07/24/2000

5. FEI Number

59-3660282

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

ADRIAN BLADES

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

5764 GRAND CANYON

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32810

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

*[Signature]*

Date 05/03/04

REGISTERED AGENT MUST SIGN

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	ADRIAN BLADES	5764 GRAND CANYON	ORLANDO, FL 32810

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)(l), 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

05/03/04 (407) 5928631

Date

Daytime Phone #

CR2E081 (01/04)

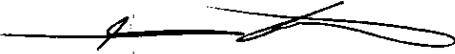
**SPEX RECORDS, INC  
5764 GRAND CANYON DR  
ORLANDO, FL 32810**

**DOCUMENT NUMBER: P00000071510**

**THIS LETTER IS TO INFORM YOU I NEVER RECEIVED THE  
DEPARTMENT OF STATE FORMS IN 2001, 2002, 2003, 2004,  
PLEASE WAIVE THE PENALTY AND REINSTATE MY  
CORPORATION.**

**I AM ENCLOSING A CHECK FOR 600 DOLLARS.**

**THANK YOU FOR YOUR PROMPT ATTENTION IN THIS MATTER.**



---

**ADRIAN BLADES**