## 2007 FOR PROFIT CORPORATION REINSTATEMENT

	KEINSTA	IEMENI		
DOCUMENT # P0100006363				kal FILED
1. Entity Name COSMOS ENTERTAINMENT, INC.				
COSMOSE	INTERTAINMENT, INC.			07 DEC 28 AM II: 05
Principal Place o	f Business	Mailing Address		SECRL LARY OF STATE
8180 GENEVA (	T	8180 GENEVA CT		TALLAHASSEE, FLORIDA
STE 129 MIAMI, FL 3310		STE 129 MIAMI, FL 33166		) (CD)(CE) IN COLD KOA BRIS COM BERN COM SOME BRIS AND CHIEF IN COLD
141.00	e of Business - No P.O. Box #	3. Mailing Address 7891 W Flac	glae St	
Suite, Apt. #, etc. <b>7</b>		Suite, Apt. #, etc. <b>7</b>		12212007 REIN-P CR2E098 (1/07)
City & State	FL	City & State Mi AMi Fi		4. FEI Number Applied For 65-1070037 Not Applicable
33/44	Country	33/44 C	Country	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registered Agent
SEGUIS, NA	IIR		Name	NAVIB SEQUIAS
8180 GENEVA CT STE 129			Street Ac	ddress (P.O Box Number is Not Acceptable)
MIAMI, FL 3	3166		789	I W Flader St # 203
٠			City	PL Zip Code 33/44
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOWI!! FEE IS \$150.00  After January 1, 2008, Fee will be \$300.00  In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AN				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
	PTSD	☐ Delete	TITLE	NATIO SEQUIAS Change Addition
1	SEGUIAS, NAJIB 180 GENEVA CT STE 129		name Street address	1891 W Flager St # 203
1	MAMI, FL 33166		CITY-ST-ZIP	Minuli PL 33144
TITLE		☐ Delete	TITLE	20011346399680 Addition 12/28/07-01009-003 **150.00
NAME STREET ADDRESS			NAME STREET ADDRESS	12728/07-01009003 **130.00
CITY-S1-ZIP			CTTY-S1-ZIP	
TITLE NAME		☐ Delete	TITLE NAME	DEINICTATER & CARP D. Change Addition
STREET ADDRESS			STREET ADDRESS	REINSTATEMENT Addition
CITY-S1-ZIP			CITY-ST-ZIP	Martin halding in control and an analysis of the control and a
TITLE NAME		☐ Delete	TITLE NAME	☐ Change
STREET ADORESS			STREET ADDRESS	/ /⁄//
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE NAME		☐ Delete	TITLE NAME	Codition
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP		Delete	CITY-ST-ZIP	☐ Change ☐ Addition
NAME		C Delete	NAME	Citaliye C Auditori
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	
12. I hereby cer	tily that the information supplied with t	his filing does not qualify for the	exemptions of	ontained in Chapter 119, Florida Statutes. I further certify that the information
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				