

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 OCT 21 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *P01000068604*

1. Corporation Name

ENTERTAINMENT & MEDIA PRODUCTIONS FACILITY, INC.

2. Principal Office Address *P.O. Box 3082*

254 WEST PALM DRIVE

Suite, Apt. #, etc.

3. Mailing Office Address *P.O. Box 3082*

254 WEST PALM DRIVE

Suite, Apt. #, etc.

City & State

FLORIDA CITY, FLORIDA

City & State

FLORIDA CITY, FLORIDA

Zip

33034

Country

U.S.A.

Zip

33034

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

07/09/01

5. FEL Number

65-1121293

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

BYRON CHEN

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

1130 NW 93 AVE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33024

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

Byron Chen

REGISTERED AGENT MUST SIGN

Date *10/16/02*

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
<i>PRES.</i>	<i>BYRON CHEN</i>	<i>1130 NW 93 AVE</i>	<i>MIAMI, FL. 33024</i>
<i>V. PRES</i>	<i>MICHAEL HOO</i>	<i>P.O. BOX 3082-254 WEST PALM DR.</i>	<i>FLORIDA CITY, FL. 33034</i>

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:

Byron Chen *BYRON CHEN*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/16/02 *(305) 696-2877*

Date

Daytime Phone #

CR2E081 (9/01)

10/23/02

October 16th, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sirs:

Re: Corporation Reinstatement for Entertainment & Media Productions Facility, Inc.

We did not receive the Uniform Report that was due to be filed May 1st, 2002 and this being the first year that this report was due we did not realize that the report was never received.

We have been in contact with your office and they advised us to file the Corporation Reinstatement form along with a filing fee of \$150.00 and this letter requesting that the Reinstatement fee of \$600.00 be waived. Please note the addition to the address below.

We are sorry and apologize for this oversight and we look forward to your favorable response to our request.

Sincerely,



Byron Chen
President
Entertainment & Media Productions Facility, Inc
254 West Palm Drive-P.O. Box 3082
Florida City, FL 33034