PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM PAGE 182

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS FILED"

				^? }	41 ZB -	PM / J1			
DOCUMENT # P01000101907 1. Corporation Name KG PRODUCTION SERVICES						PRIZEST OF STATE E, FLORIDA			
8306 M Suite, Apt. # UNIT #6	623	8306 MIL Suite, Apt. #, UNIT #6: City & State	1 -		30009638733 12/23/0201059022 **150.00 4. Date Incorporated or Qualified To Do Business in Florida 10/22/01 5. FEI Number Applied For				
MIAMI, FL.			MIAMI, FL.		65-1146345 Not Applicable			plicable	
Zip Country 33183 USA		33183	Country USA	6. CERTIFICA	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee f				
		7. 1	Name and Address of Current	Registered Agent		······································			
	Name SPIEGEL & UT	RFRA PA							
	Street Address (P.O. Box Number is Not Acceptable)								
	1840 S.W. 22ND STREET								
	Suite, Apt. #, Etc. 4TH FL0	DOR							
	City MIAMI				State FL	Zip Code 33145	ō		
8. I, being	appointed the registered agent of	the above named corpo	oration, am familiar with and acco	ept the obligations of sec	tion 607.05	i05 or 617,0503, F.S.	<u> </u>		
Signature o Registered		REGISTERED AC	GENT MUST SIGN		Date				
9. Names	and Street Addresses of Each Of	ficer and/or Director (FI	orida nonprofit corporations mus	list at least 3 directors)				(<u>.</u>	
Titles	Name of Officers and/or D	irectors	Street Address of Each Officer and/or Director		City / State / Zip				
P/T	ROBERT MURRAY		11350 SOUTHWEST 3RD STREET		PLANTATION, FL. 33325				
								i	
			DL URA		18				
				<i>V</i>					
1.7	-								
10. certify	that I am an officer or director or		mpowered to execute this applica					filing	

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.

SGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

ROBERT MURRAY

12/17/02

(305)382-2020

Date

Daytime Phone #

page wh

KG Production Services 8306 Mills Dr. #623 Miami, FL. 33183

To Reinstatement Officer:

I've recently returned from a trip to Jamaica taking care of a 2 month Web-Site project. On my return I've discovered my company; KG Production Services was termed "Inactive". I called in immediately to resolve any problems that may have occurred in my absence. I was then informed of a renewal fee amounting \$150.00 of which I had no prior knowledge of because I haven't received any for warned notices of this fee. This was the first year of the companies operation since its establishment 10/22/01. So I apologize for not knowing of this fee, only because I wasn't aware not because of negligents on my part. Please allow me to meet this obligation by sending you the check for the owed amount as to meet your requirement. I have also filed the necessary documentation (UBR Form) with the correct business address to prevent missing your notices in future.

Thank you,

Gary Grocher

KG Production