## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **APPLICATION FOR** REINSTATEMENT



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS FILED

<del>03 |</del>07 | 13 | PM **3**: | 13

DOCUMENT #

D01000103708

Daytime Phone #

1. Corporation Name SE TAL							DRETARY OF STATE LAHASSEE, FLORIDA			
HIGH	NOIEP	RODUCTIONS,	INC.				}			
Principal F	Place of Busine	ess	dress	ress						
UNIT 298	T HALLANDALE ALE FL 33009	BEACH BOULEVARD	· UNIT 298	1835 EAST HALLANDALE BEACH BOULEVARD UNIT 298 HALLANDALE FL 33009						
If above	addraceae ara	incorrect in any way, line	through incorrect	t information	and enter	correction below	DEIN	STATME	NT 63	
		Address, If Applicable		lew Mailing Office Address, If Applicable			Date Incorporated or Qualified			
Suite, Apt. #, etc. Suite, Ap City & State City & Sta				Apt. #, etc. State			To Do Business in Florida 10/26/2001			
							GE_114000E		Applied For Not Applicable	
Zip Country			Zip		Country	у	6. CERTIFICATE OF STATUS DESIRED 6 58.75 Additional Fee require for a Certificate of Status			
7. Names	and Street Ad	Idresses of Each Officer ar	nd/or Director (F	lorida nonpro	ofit corpora	itions must list at lea	ıst 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip		
PSTD	ROLPH, GREGORY J			1835 EAST HALLAN			BOULE	HALLANDALE FL 33009		
				100024636351 11/13/0301044006 **150.00						
					<del></del> -		11/15/	<u>                                      </u>	**150,00	
	<del> </del>		<del></del>				<u> </u>			
<u></u>		<del>-</del>					<del></del>			
	<u> </u>	_								
8: Name and Address of Current Registered Agent Name							9. Name and Address of New Registered Agent			
	SEL & UTRE SW 22ND S			Gregory J Rolph Street Address (P.D. Box Number is Net Acceptable) 1835 E Hallanda le Beach Blvd						
4TH F	LOOR	••				Suite, Apt. #, Etc.	-, marama 29B	are beach si	<i>y</i>	
MAM	I FL 33145					CityHalland	lale	Sta		
10. I, bein	g appointed th	e registered agent of the a	ibove named corp	poration, am	familiar wi	th and accept the ol	bligations of Sect	ion 607.0505, F.S. or 617.05		
Signature Registered	of d Agent	ZIZI	Mari			IRED		Date 1/7/0	3	
this rei	nstatement ap	plication, the reason for dis	ssolution has bee	empowered to	o execute , the corpo	rate name satisfies	the requirements	apter 607 or 617, F.S. I furth s of section 607,0401 or 617. der section 119.07(3)(i), F.S	.0401, F.S., that all fees	



# Accounting & Bookkeeping Service, 9nc.

1990 N.E. 163rd St., Suite #108 North Miami Beach, Fl 33162 (305) 945-7892 Fax (305) 945-7675

Date:

November 5, 2003

To:

Division of Corporations

Annual Report/Reinstatement Section

P. O. Box 6327 Tallahassee, FL 32302-6327

From:

Mark Fernandes C/O Accounting & Bookkeeping Services, Inc.

1990 NE 163<sup>rd</sup> Street Suite # 108 North Miami Beach, Fl 33162

CC

Gregory J. Rolph, President of High Note Productions, Inc.

RE:

Submission of 2003 UBR for High Note Productions, Inc. Document #

P01000103708

#### Dear Sir or Madam:

We have recently received a Notice of Administrative Dissolution or Revocation Report with a Reinstatement fee of \$600.00 (see attached). We did not receive the Uniform Business Report for 2003 and respectfully request that you please waive the reinstatement fee.

In addition, we have included a check for the annual report fee made payable to the Department of State in the amount of \$150.00. If you have any questions please call me at 305-945-7892.

Thank you for prompt response,

Mark Fernandes

Accounting & Bookkeeping Services, Inc.

CC: Gregory J. Rolph, President of High Note Productions, Inc.