

PLEASE READ ALL INSTRUCTIONS BEFORE C

FILED

03 FEB 20 AM 8:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # **P01000106909**

1. Corporation Name

Fisher Productions Inc.

900012869149
02/20/03--01043--004 ***300.00

2. Principal Office Address

3530 SW 144th Ave.

State, Apt. #, etc.

City & State

Miramar, FL

Zip

33027

Country

USA

3. Mailing Office Address

3530 SW 144th Ave.

State, Apt. #, etc.

City & State

Miramar, FL

Zip

33027

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

November 6, 2001

5. FEI Number

65-1155792

Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

William Fisher

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

3530 SW 144th Ave.

State, Apt. #, Etc.

City

Miramar

State
FL

Zip Code
33027

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 **December 27, 2002**

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
President	William Fisher	3530 SW 144th Ave.	Miramar, FL 33027

10. I certify that I am an officer or director of 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)(c), 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]

William Fisher

December 27, 2002

305-481-3330

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Office Phone #

CR2002 (REV)

Fisher Productions Inc.

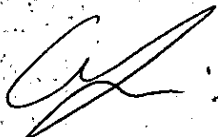
3530 SW 144th Ave Miramar, FL 33027 305-481-3330

February 17, 2003

To whom it may concern,

Please be advised that due to a clerical error on the States part, we never received our paperwork to file for the Annual Report. This is the sole reason the paperwork was not filed in time. For this reason I would ask that the State waive the late filing fees.

Thank you,



Bill Fisher
President
Fisher Productions Inc.
65-1155792