

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JUN 25 AM 8:17

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P02000026468

1. Corporation Name

Goodfellaz ENTERTAINMENT, Inc.

REINSTATEMENT 03-04

2. Principal Office Address

3424 Stewart Blvd

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 421888

Suite, Apt. #, etc.

City & State

Kissimmee, FL

City & State

Kissimmee, FL

Zip

34746

Country

OSCEOLA

Zip

34742

Country

OSCEOLA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

01-0632034

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

Nicholas MANBRU

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

3424 Stewart Blvd

Suite, Apt. #, Etc.

City

Kissimmee,

State

FL

Zip Code

34746

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]

REGISTERED AGENT MUST SIGN

Date

6/23/04

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
P/S	Nicholas MANBRU	3424 Stewart Blvd	Kissimmee, FL 34746
T	Nicholas MANBRU JR	3424 Stewart Blvd	Kissimmee, FL 34746
D	DANILLO Sanchez	3424 Stewart Blvd	Kissimmee FL 34746
D	Reymundo Sosa	3424 Stewart Blvd	Kissimmee FL 34746

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/04 407-738-3626

Date

Daytime Phone #

CP2E081 (01/04)

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June 23, 2004

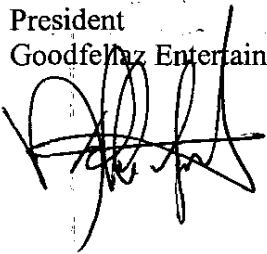
Department of State
Division of Corporation
409 East Gaines St
Tallahassee, Florida 32399

Dear: Sirs

Enclosed you'll find copy of reinstatement form and check for \$300.00 as you requested for the renewal of said corporation. It came to us as a surprise that we had not received any information for said renewal of our corporation. Please accept this payment and activate our corporation as soon as possible. In the future, we will keep this renewal in mind so that this does not reoccur. Thank you for your prompt attention.

Sincerely,

Nicholas Manbru
President
Goodfellow Entertainment, Inc

A handwritten signature in black ink, appearing to read 'Nicholas Manbru', is written over the printed name and title.