

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P02000104193**

1. Corporation Name

CATALYST ENTERTAINMENT, INC.

Principal Place of Business

Mailing Address

~~5280 MIDDLE COURT~~
~~ORLANDO FL 32811~~

~~5280 MIDDLE COURT~~
~~ORLANDO FL 32811~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

845 N Garland Ave Studio 100D

City & State

Orlando, FL

Zip

32801

Country

USA

Suite, Apt. #, etc.

845 N. Garland Ave Studio 100D

City & State

Orlando, FL

Zip

32801

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/26/2002

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	SANCHEZ, JAY	5280 MIDDLE COURT	ORLANDO FL 32811

8. Name and Address of Current Registered Agent

HABER, LAWRENCE H ESQ
606 FRONT STREET
CELEBRATION FL 34747-0171

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/23/03 407-425-5646

Date

Daytime Phone #



Divisions of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

The Lab
407.425.5646

Facsimile
407.425.7156

US Watts
866.425.LOGO

To Whom It May Concern:

845 N. Garland Ave.
Studio 100D
Orlando, FL 32801

I am contacting you regarding a recent penalty for failure to file the annual state corporate fees. As stated before in a letter to Justin Shivers, we did not receive the first set of paperwork for the Catalyst Studio Corporation renewal until after the deadline had passed. Earlier we sent a letter notifying to the Division of Corporations about our address change. This too was not applied which is why we did not receive the original annual forms. Upon second notice, we immediately sent you the full payment and cover letter explaining reasons for the late payment. Furthermore, it was explained to us on the phone that we would not have to pay additional fees as long as we sent in the \$150.00 for renewal which we did and was processed by your state agency. However, we recently received a notice of administrative dissolution of revocation. Please see the attached original letter of address change notification and applications for reinstatement of corporations, as per Ladell Bryant on 10/23/2003 1:56pm.

Thank you,

J Sanchez
CEO Catalyst Holdings Inc. Doc # P02000106347
The Catalyst Studio Corporation. Doc # P01000025675
Catalyst Entertainment Inc. Doc # P020001041093