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 # P02000121974

1. Corporation Name

JOSEPHS ENTERTAINMENT, INC.

Principal Place of Business

Mailing Address

6203-C WEST SAND LAKE ROAD ORLANDO FL 32819

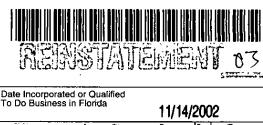
6203-C WEST SAND LAKE ROAD

ORLANDO FL 32819

FILED

03 OCT 17 PM 3: 25

SECRETARY OF STATE TALLAHASSEE, FLORIDA



. If above addresses are incorrect in any way, line through incorrect information and enter correction below.									
New Principal Office Address, If Applicable 3. New Mailing Office Address, If						Date Incorporated or Qualified To Do Business in Florida 11/11/2002			
Suite, Apt.	#, etc.		Suite, Apt. #	Suite, Apt. #, etc.			11/14/2002 5. FEI Number		
City & State City				City & State			2303023	Applied For Not Applicable	
Zip Country			Zip		Country	6.	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status		
7. Names	and Street Ad	dresses of Each Officer an	d/or Director (Flo	orida nonpro	fit corporations must list at le	east 3 directors)			
Title(s) 1	Name of Officers and/or Directors			Street Address of Eac Officer and/or Directo			City / State / Zip		
D	JOSEPHS, KURT 62			6203-C V	6203-C WEST SAND LAKE ROAD		ORLANDO FL 32819		
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	z * .	. !							
		e and Address of Curren	t Registered Age	ent		9. Name and Address of New Registered Agent			
-					Name	<u> </u>		CRS-FOAG (7703)	
JOHNSON, SCOTT E MORAN & SHAMS, P.A. 111 N. ORANGE AVE., STE. 1200 ORLANDO FL 32801					Street Address (Street Address (P.O. Box Number is Not Acceptable)			
					Suite, Apt. #, Etc	Suite, Apt. #, Etc.			
					City	State Zip Code FL			
10. I, being	appointed the	e registered agent of the ab	ove named corp	oration, am f	amiliar with and accept the o	obligations of Sec	tion 607.0505, F.S. or 617.0505	i, F.S.	
Signature o Registered	of Agent	SIGNA	TURE		QUIRED		Date		
REGISTERED AGENT MUST SIGN									
this rein	statement app	lication, the reason for diss	solution has been	eliminated,	the corporate name satisfies	s the requirements	apter 607 or 617, F.S. I further of sof section 607.0401 or 617.04 older section 119.07(3)(i), F.S. T	01, F.S., that all fees	

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: XS