### 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 # P02000122471

1. Corporation Name

### BALBOA PRODUCTIONS & DESIGNS, INC.

Principal Place of Business Mailing Address 962 NORTHLAKE BLVD. 962 NORTHLAKE BLVD. #171 #171 LAKE PARK FL 33403 LAKE PARK FL 33403 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 Date Incorporated or Qualified
To Do Business in Florida 1.1/15/2002 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable \$8,75 Additional Fee required Zip Country Country Zip CERTIFICATE OF STATUS DESIRED 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) Name of Officers Street Address of Each Title(s) City / State / Zip and/or Directors Officer and/or Director Ρ BATISTA, DANIE'L 962 NORTH LAKE BLVD. #171 LAKE PARK FL 33403 ٧ BATISTA, DANIE'L 962 NORTH LAKE BLVD. #171 LAKE PARK FL 33403 T BATISTA, DANIE'L 962 NORTH LAKE BLVD. #171 LAKE PARK FL 33403 S BATISTA, DANIE'L 962 NORTH LAKE BLVD. #171 LAKE PARK FL 33403 300024808683 11/18/03---01085---008 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent

962 NORTHLAKE BLVD. #171

BATISTA, DANIE'L

LAKE PARK FL 33403

FILED

.03 NOV 18 AM 11:54

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

AME AS

Suite, Apt. #, Etc.

City

Zip Code State

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

REGISTERED AGENT MUST SIGN

11. I certify that ram 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 AND TYPED OR RINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Balboa Productions & Designs, INC.

November 7, 2003

Florida Department Of State Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, FL. 32314-6327

RE: NON - Receipt of 2003 Corporation Annual Report / Uniform Business Report

Check #1018 dated Nov, 07, 2003

Dear Sirs:

I am hoping to receive your assistance with regard to this matter. I just received notification that my Business, "Balboa Productions & designs, INC. was dissolved for failure to file a 2003 Corporation Annual Report / Uniform Business Report. I have checked my records and files and have read your literature referencing the 1<sup>st</sup> request and the second annual reports / uniform business reports. I did not receive these requests.

We are a new company and I will now mark my calendar to ensure proper and prompt response for future reference. Should I not receive these items in the future I can expect to pull them off your website knowing that they are due between January 1 – May 1 of each year. Please accept my \$150.00 fee and 2003 Corporation Annual Report / Uniform Business Report.

Should you have any questions, please contact me at 561-842-8776. Thank you for your time and anticipated assistance in this matter.

Sincerely,

-Danie'l Batista --

President - Balboa Productions & Designs, INC.