## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000135602  1. Entity Name ENVY ENTERTAINMENT, INC.					SECRETARY DIVISION OF C				
Principal Place of Business 7808-SHALIMAR ST MIRAMAR, FL 33023	MAR ST 7808 SHALIMAR ST			05 JAN 18 PM 4: 43 REMSTATEMENT 04-05					
2. Principal Place of Business 25 NE 62nd St.									
Suite, Apt. #, etc.				1132005	REIN-P	CR2E098 (	(6/04)		
City & State . FL			4.	4. FEI Number 01-0814803			Applied For Not Applicable		
33138 Migmi-Date	33138	Country Miamin D			f Status Desired		75 Add Required	litional	
6. Name and Address of Current Registered Agent Name					ddress of New Re	<del></del>	ì		
HAMMONDS, JAMAR L -7808 SHALIMAR ST			Benedict Almonor Street Address P.O. Box Number, is Not Acceptable)						
MIRAMAR, FL 93023			NE	62nd	ST				
		City	Mian	7.		FL Z	in Code	3 c .	
The above named entity submits this statement for the obligations of registered agent.	r the purpose of changing its	registered office			, in the State of Flori		ar with, a	and accept	
SIGNATURE SIGNATURE									
NOTE: Registered Agent aignature require						DATE			
FILE NOW!!! FEE IS \$300.00					In accordance wi corporation did n	th s. 607,193( ot receive the	(2)(b), F prior n	F.S., the notice.	
10. OFFICERS AND	DIRECTORS	11.			HANGES TO OFFIC	ERS AND DIRE	CTORS	3 IN 11	
TITLE D NAME HAMMONDO, JAMAR L	Delete	TITLE NAME	vice	cury	Dunce		Change	☐ Addition	
STREET ADDRESS 7808 SHALIMAR ST		STREET ADDRESS	25 X	ve a	and St.	_			
CITY-ST-ZIP MIRAMAR, FL 33923 TITLE D	Delete	CITY-ST-ZIP	Die	am,	FL 33	<u>/3.8 </u>	Change	Addition	
NAME ALEXANDER, BLAKE C	□ Delicie	NAME	Alex	and	er Bla		y realige.	L. Addition	
STREET ADDRESS 7606 SHALIMAR ST CITY-ST-ZIP WIRAMAR, PL 33023		STREET ADDRESS CITY-ST-ZIP	25 N	E 621	d'St	3138			
me Treasurer	, Delete	TITLE	17/11	umij	J-6 3.		Change	Addition	
NAME Danion McKe	nsie	NAME STREET ADDRESS							
NAME Damion McKe STREET ADDRESS 25NF 62nd S CITY-ST-ZIP MIAMI FL	33138	CITY-ST-ZIP							
TITLE	☐ Delete	TITLE NAME		رے وی			Change	Addition	
NAME Street address		STREET ADDRESS		01/19/	1 <mark>00450</mark> 10501047-	ടാ <b>ം</b> ഗ്രേ	*300.	.00	
CITY-ST-ZIP		CITY-ST-ZIP						- Addition	
TITLE NAME	☐ Delete	TITLE NAME					Change	Addition	
STREET ADDRESS CITY-SI-ZIP		STREET ADDRESS CITY-ST-ZIP			•				
TITLE	☐ Delete	TITLE					Change	Addition	
NAME		NAME					-		
STREET ADDRESS CITY-ST-ZIP		STREET ADORESS CITY+ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: 1/18/2004 (305)751-7900									