PAGE 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 FEB -3 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000000078

1. Corporation Name
Chase Entertainment Corp.

200065818292
02/14/06--01022--006 **750.00

2. Principal Office Address	3. Mailing Office Address
1020 Euclid Ave #5	7378 W. Atlantic Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	Suite #250
City & State	City & State
Miami Bch FL	Margate FL
Zip: 33139 Country: USA	Zip: 33063 Country: US

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 14-1873264 ☐ 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: David Abram

Street Address (P.O. Box Number is Not Acceptable): 7378 W. Atlantic Blvd Suite #250

Suite, Apt. #, Etc.:

City: Margate State: FL Zip Code: 33063

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: _____ Date: 10/27/05
REGISTERED AGENT MUST SIGN

CR2E081 (01/05)

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
V.P.	Michael Blumstein	11955 NW 57th Manor	Coral Springs, FL 33076
PRES.	David Abram	5721 NE 21st Road	Ft. Lauderdale FL 33308
		B 1/25/06	
		REINSTATEMENT 02-04	

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: _____ 10/27/05 (954) 979-3544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Page 1 of 2

CHASE ENTERTAINMENT

Monday January 17, 2006

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

REF: Reinstatement Fee / Application

To Whom It May Concern:

I am writing your office to reinstatement Chase Entertainment Corporation (EIN 14-1873264). We moved our offices in 2002 and did not receive the Annual Uniform Business Report.

We request reinstatement of the company (see attached form). A check is attached in the amount of $750 representing the annual fee from 2002 through 2006.

We also request the penalty be waived as this was a simple oversight on our part. The new mailing address is show below.

Thanks in advance. Please call in the event of any questions.

Regards,

David Abram

7378 W. Atlantic Boulevard – Suite 118. Margate, FL 33063