

2005 FOR PROFIT CORPORATION REINSTATEMENT

1092

DOCUMENT # P03000131822	
1. Entity Name 1ST CLASS ENTERTAINMENT, INC.	



05 DEC 14 PM 2:14

SEC. OF STATE
TALLAHASSEE, FLORIDA
RECEIVED
05

Principal Place of Business 6005 BERMUDA DRIVE ORANGE PARK, FL 32003	Mailing Address 6005 BERMUDA DRIVE ORANGE PARK, FL 32003
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2. Principal Place of Business 1561 ROYAL FERN LANE Suite, Apt. #, etc.	3. Mailing Address 1561 ROYAL FERN LANE Suite, Apt. #, etc.
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11032005 REIN-P CR2E098 (6/04)

City & State ORANGE PARK FL	City & State ORANGE PARK, FL
Zip 32003	Zip 32003
Country USA	Country USA

4. FEI Number 90-0136607	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STEPHEN E. TILLEY, CPA 4465 BAYMEADOWS RD., STE. 3 JACKSONVILLE, FL 32217	
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7. Name and Address of New Registered Agent Name MARC NAULT Street Address (P.O. Box Number is Not Acceptable) 1561 ROYAL FERN LANE City ORANGE PARK FL Zip Code 32003	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE MARC NAULT DATE 11/21/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

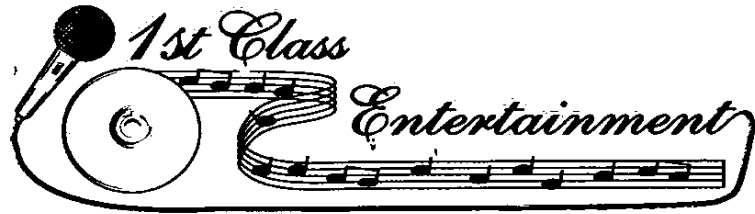
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NAULT, MARC 6005 BERMUDA DRIVE ORANGE PARK, FL 32003 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARC NAULT 1561 ROYAL FERN LANE ORANGE PARK, FL 32003 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

000062483890
12/30/05--01007--003 **\$150.00

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: MARC NAULT (PRES) 11/21/05 904-269-7600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



2072

November 1, 2005

Florida Department Of State
Division Of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: P03000131822

Dear Sir or Madam:

Enclosed is check number 1173 in the amount of \$150.00 to file my corporations annual report. Due to several moves that the corporation made during the year I was not aware nor did I receive any notice that this report was due. I would appreciate any help that you give me to have the penalty waived due to the circumstances.

If you have any questions, please do not hesitate to give me a call at (904) 838-7425.

Sincerely,

Marc Nault
President