

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 OCT 17 PM 3:16

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000093213

1. Corporation Name

ENTERTAINMENT TECHNOLOGY ENGINEERING, INC.

2. Principal Office Address

8970 West Flagler St.

Suite, Apt. #, etc.

#101

City & State

Miami

Zip

FL

Country

DADE

3. Mailing Office Address

8970 West Flagler St.

Suite, Apt. #, etc.

#101

City & State

Miami

Zip

FL

Country

DADE

CR2E081 (12/05)

05-06

**4. Date Incorporated or Qualified
To Do Business in Florida** 06/17/2004

5. FEL Number
201257114

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
Alfredo Gamboa

Street Address (P.O. Box Number is Not Acceptable)
8970 West Flagler St.

Suite, Apt. #, Etc.

#101

City

Miami

State

FL

Zip Code

33174

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

REGISTERED AGENT MUST SIGN

Date 10/10/2006

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
PD	Alfredo Gamboa	8970 West Flagler St. #101	Miami, FL 33174

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 contained in Chapter 119, 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:

Alfredo Gamboa

10/10/2006

305-342-3675

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/12/06

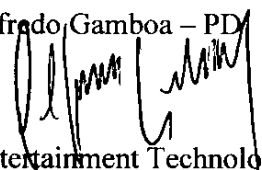
Department Of State
Division of Corporations

To Whom It May Concern:

We're sending attached the reinstatement form for Entertainment Technology Engineering, Inc. At the same time we're asking you to waive the reinstatement fee based on an error on our mail address.

We're also sending a check for \$150.00 for annual report filling of 2005.

Alfredo Gamboa - PD


Entertainment Technology Engineering, Inc.
Document Number: P04000093213

8970 West Flagler St. # 101
Miami, Fl. 33174