

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

ATX1

REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 SEP -2 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000158105

1. Corporation Name

SECRET PLACE PRODUCTIONS INC.

2. Principal Office Address

7731 RENWOOD CT

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32818

Country

USA

3. Mailing Office Address

PO BOX 683012

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32868-3012

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/15/2004

5. FEI Number

56-2488120

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

LEONARD, CHERYL

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

7731 RENWOOD CT

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32818

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

7/7/2005

REGISTERED AGENT MUST SIGN

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	LEONARD, CHERYL	7731 RENWOOD CT	ORLANDO, FL 32818
VPD	LEONARD, DERECK	7731 RENWOOD CT	ORLANDO, FL 32818

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEONARD, CHERYL

7/7/2005

Date

(407) 895-5933

Daytime Phone #

Robinson and Robinson Inc.

July 7, 2005

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

To Whom It May Concern,

This letter is to inform you that SECRET PLACE PRODUCTIONS, INC., did not receive any prior notices or information pertaining to the Annual Corporate Reports for the year (2005). Due to these circumstances we are asking that you abate the reinstatement fees. If there are any questions you can contact me at (407) 895-5933. Document #P04000158105. Enclosed is \$150.00 for the year of 2004.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,



Maurice Robinson