

2007 FOR PROFIT CORPORATION REINSTATEMENT

ADDITIONAL

FILED
Dec 27, 2007 8:00 A.M.
Secretary of State

DOCUMENT # P04000166975 1. Entity Name GOODTIME KARAOKE, INC.					
Principal Place of Business 6215 STONE RD SUITE 10 PORT RICHEY, FL 34668 US			Mailing Address 6215 STONE RD SUITE 10 PORT RICHEY, FL 34668 US		
2. Principal Place of Business - No P.O. Box # 12807 SETTLERS DR		3. Mailing Address 12807 SETTLERS DR			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State HUDSON FL		City & State HUDSON FL		4. FEI Number 34-2028966	
Zip 34667		Country 		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent TANNER, LUCILE E 4881 SHELL STREAM BLVD NEW PORT RICHEY, FL 34652			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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		Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
DATE 12-26-07		DATE			
FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP TANNER, STEPHEN F 4881 SHELL STREAM BLVD NEW PORT RICHEY, FL 34652 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> 100113429451 12/27/07-01019-007 **150.00 </div>	
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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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: STEPHEN F. TANNER					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 12-26-07 (722) 946-5555					