

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000012501

**FILED**  
**Nov 06, 2013**  
**Secretary of State**

**Entity Name:** PM PRODUCTIONS ENTERTAINMENT INC.

**Current Principal Place of Business:**

2219 SW 45TH AVE  
BELL, FL 32619

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 547035  
ORLANDO, FL 32854

**New Mailing Address:**

2219 SW 45TH AVE  
BELL, FL 32619

**FEI Number:** 90-0187155

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MULLEN, CHRISTINE  
2219 SW 45TH AVE  
BELL, FL 32619 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:** CHRISTINE MULLEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** PECHACEK, VICTOR  
**Address:** 1430 MANCHESTER ST.  
**City-St-Zip:** ORLANDO, FL 32804

**Title:** VSTD  
**Name:** MULLEN, CHRISTINE  
**Address:** 2219 SW 45TH AVE  
**City-St-Zip:** BELL, FL 32619

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** CHRISTINE MULLEN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

VP

11/06/2013

\_\_\_\_\_  
Date