

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 NOV 18 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

①

DOCUMENT # **P28907**

1. Corporation Name

EMEBE MEDIA CORP.

Principal Place of Business

Mailing Address

1800 SECOND STREET
STE. 799
SARASOTA FL 34236

1800 SECOND STREET
STE. 799
SARASOTA FL 34236

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

04/13/1990

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0173049

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
RD	LEWIS, BARRY	767 5TH AVE	NEW YORK NY
P	LEWIS, ERIC	767 5TH AVE	NEW YORK, NY
V	SMITH, MARYANNE	767 FIFTH AVENUE	NEW YORK NY
S V	MITCHELL, MOIRA	767 5TH AVE	NEW YORK NY 10153
D	LEWIS, BARRY	767 5TH AVE	NEW YORK, NY

8. Name and Address of Current Registered Agent

FLECK, AARON H
1800 SECOND STREET
STE. 799
SARASOTA FL 34236

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

000002353220-3

11/20/97-01087-009

****165.00 ****165.00

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Aaron Fleck

REGISTERED AGENT MUST SIGN

Date 11-10-97

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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)(f), 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

E. Corina Coff

4/12/97

(212) 764-8100

CR2E040 (8/97)

②

Emebe Media Corp.
1800 Second Street, Suite 799
Sarasota, Florida 34236
(813) 954-8800 Fax (813) 954-3640

November 3, 1997

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL. 32314-6327

Re: Emebe Media Corp. FEI# 65-0173049

Dear Sir or Madam:

I was instructed by Amy of your reinstatement department to inform you in writing that we did not receive the original annual report that was due May 31, 1997. She suggested that we complete the application for reinstatement and enclosed the filing fee of \$165.

I am submitting the above for reinstatement. Please call me if you should have any questions at (212) 754-8110.

Sincerely,


Celphon Chan
Controller