

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P930000059178**

1. Corporation Name

Sea Breeze Video, Inc.

Principal Place of Business

Mailing Address (same)

6535 142nd Avenue North  
Clearwater, FL 34624

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

2. New Principal Office Address, If Applicable  
6535 142nd Avenue N.

3. New Mailing Office Address, If Applicable  
6535 142nd Ave. N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
St. Petersburg, FL

City & State  
Clearwater, FL

Zip 34624 Country U.S.

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FILED

00 FEB 16 AM 11:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

August 27, 1993

5. FEI Number

59-3197817

Applied For

Not Applicable

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
P, S, T D	Dean Tyler	310 Coffee Pot Riviera N.E.	St. Petersburg, FL 600003145376--8 -02/23/00--01107--005 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

B. Gray Gibbs, Esquire  
100 Second Avenue South  
Suite 704  
St. Petersburg, FL 33701

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

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

*B by bill*

REGISTERED AGENT MUST SIGN

Date

2-9-00

11. This corporation owes 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)(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:

*Dean Tyler* DEAN TYLER 1203  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/11/00

Daytime Phone #

7275390004

CR2E081 (12/98)