

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000078520**

1. Corporation Name

REAL RADIO INC

Principal Place of Business

1015 FLEMING STREET
KEY WEST FL 33040

Mailing Address

1015 FLEMING STREET
KEY WEST FL 33040

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
03 NOV -7 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

11/08/1993

5. FEI Number

65-0448531

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)

Title(s)

1

Name of Officers
and/or Directors

2

Street Address of Each
Officer and/or Director

3

City / State / Zip

4

D

EDEN, H. MICHAEL

1015 FLEMING STREET

KEY WEST FL 33040

000024525710

11/07/03--01085--023 **150.00

8. Name and Address of Current Registered Agent

EDEN, H. MICHAEL
1015 FLEMING STREET
KEY WEST FL 33040

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. or 617.0505, F.S.

Signature of
Registered Agent

Mike Eden **SIGNATURE REQUIRED**

REGISTERED AGENT MUST SIGN

Date

10/31/03

11. 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:

Mike Eden **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/31/03

Daytime Phone #

305-246-1868

CR2E040 (7/03)




1015 FLEMING STREET • KEY WEST, FLORIDA • 33040
(305) 296-6868
www.edenhouse.com

To Whom It May Concern:

This is the first thing I have received from the state. It is also my understanding other people in Key West that they received a letter stating note receiving original forms could reinstate for \$150.00. Therefore I'm enclosing \$150.00.

Sincerely,


Mike Eden